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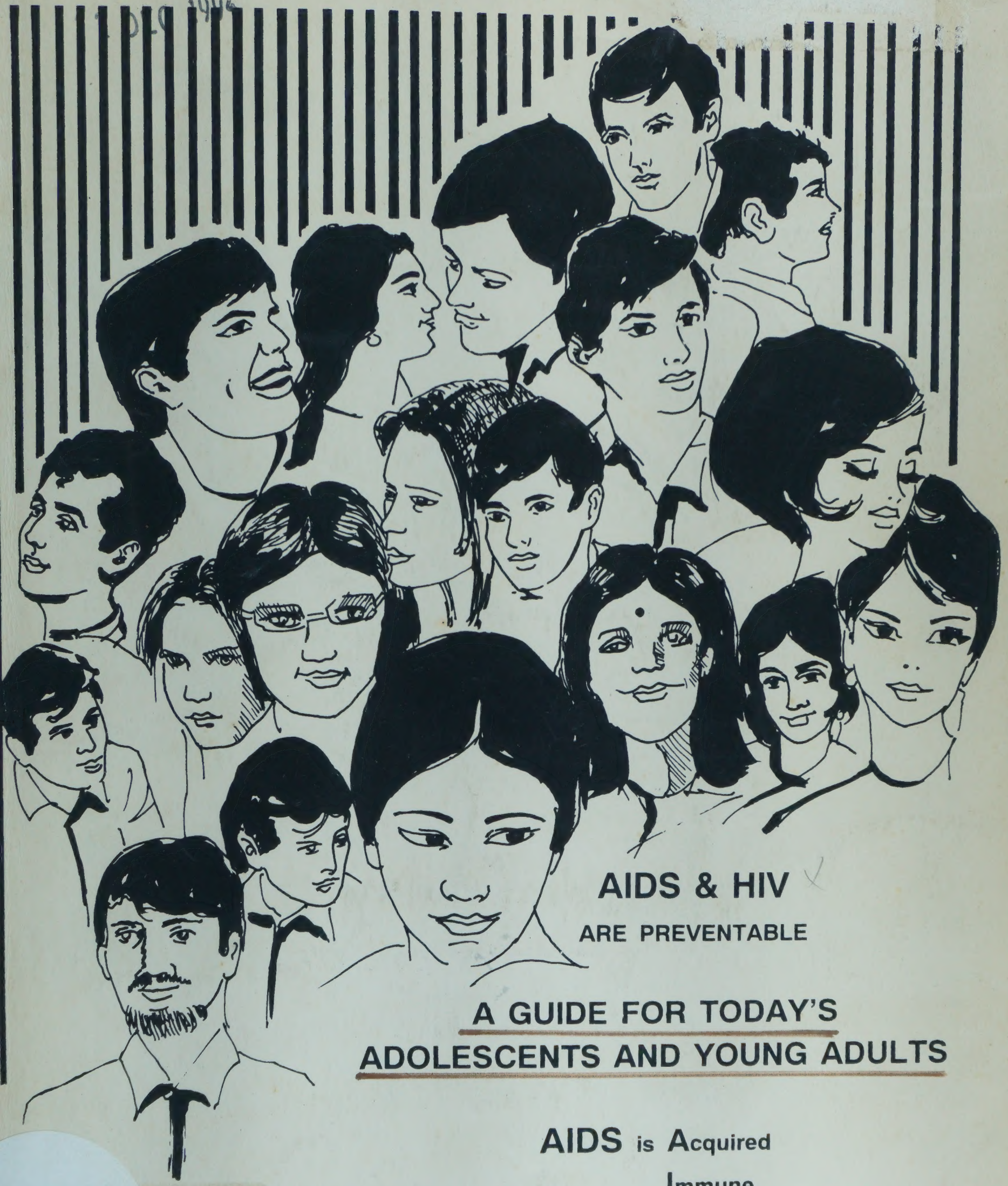

AIDS & HIV

ARE PREVENTABLE

A GUIDE FOR TODAY'S ADOLESCENTS AND YOUNG ADULTS

AIDS is **A**cquired
Immune
Deficiency
Syndrome

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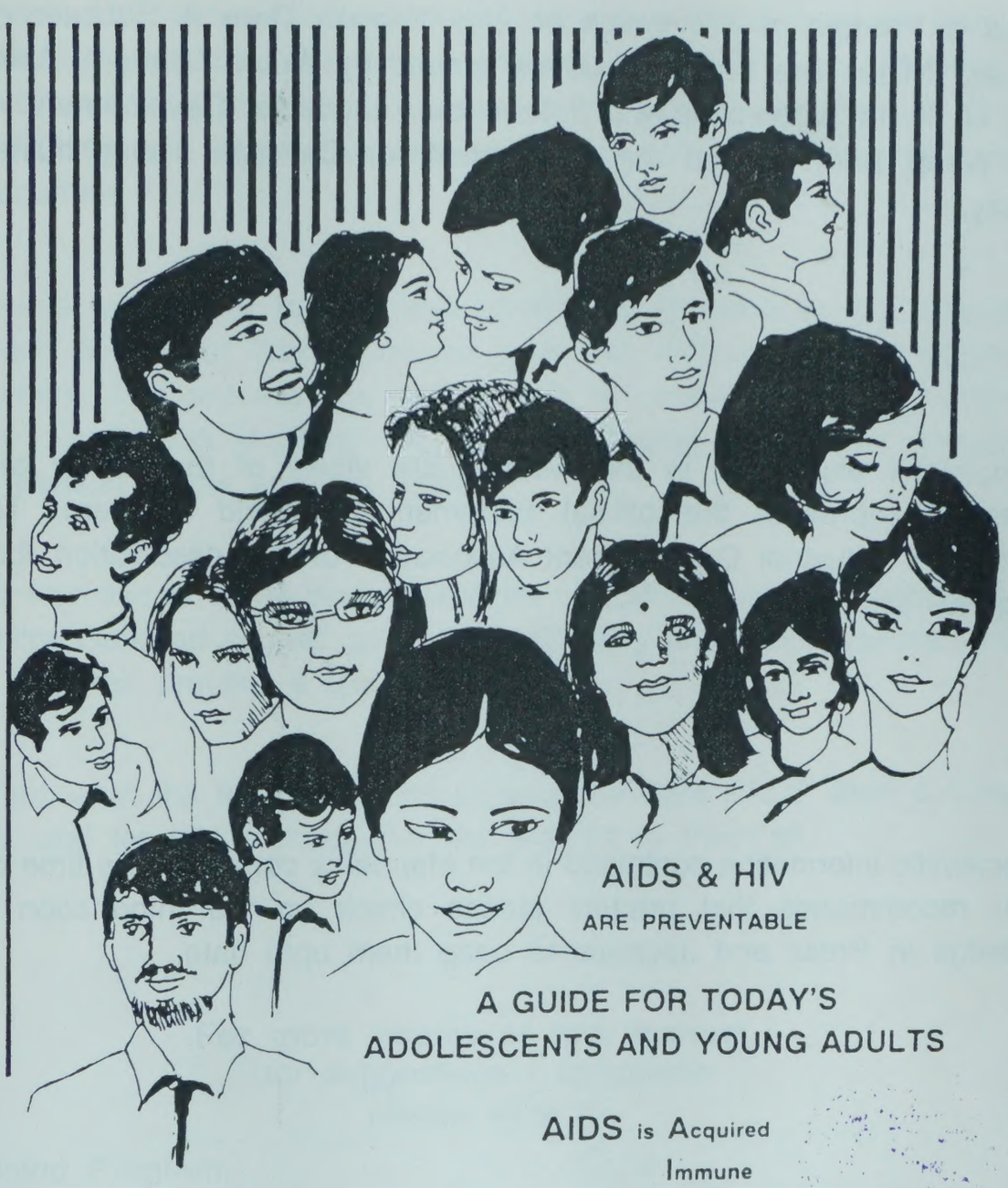
HIV/AIDS EDUCATION MANUEL

A Training Program for Health Care Professionals & Volunteers



Please read the guide and begin to use it - today - to give the young people you love the information they need to protect themselves. AIDS can be stopped, but only with your help.

HIV/AIDS EDUCATION MANUEL

This is a Product of Prevention of Aids through Care & Education Project in Bombay, INDIA. The Project is Jointly funded by Would Concern, Asia and Tear Fund, U. K. in partnership with Intermission Industrial Development Association (IIDA West) Bombay and the Association for Christian Thoughtfulness (ACT), Bombay.

The opinions expressed in this Manuel are views of the author and do not necessarily represent the official Statement of World Concern, Tear Fund, Intermission Industrial Development Association or the Association for Christian Thoughtfulness.

The scientific information contained in the Manuel is correct at the time of printing. Author recommends that readers please check up the information with new knowledge in Press and Journals to beep them upto date.

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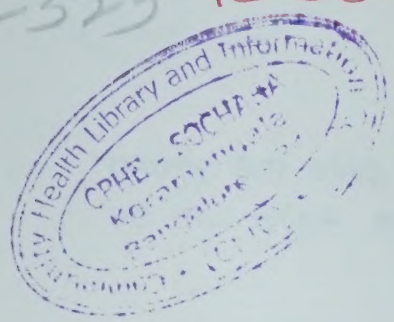


ACKNOWLEDGMENTS –

This manuel is intended for use by Health Educators, Youth Group Leaders and Community Volunteers working in AIDS/HIV prevention programmes.

In preparation of this manuel author has used and modified materials from various Educational Materials of World Health Organisation, ACET London, Publications of World Counsil of Churches and some other scientific publications. We thank every publication and its producer who may have directly or indirectly contributed to this document.

The technical and moral support and assistance provided to this document by Management & Staff of World Concern Asia was instrumental and important for the Document. We express our thanks with a sense of respect to Mr. Terril Eikenberry, Dr. Harold Mischke and Mr. Paul Kennel from World Concern Asia office to mention a few amoung them.

We would also like to thank Board Directors of IIDA, Bombay West their Manager Rev. Sumitra Gaikwad as well as of ACT, Bombay and their Chairman Rev. Viju Abraham for their prayers & leadership.

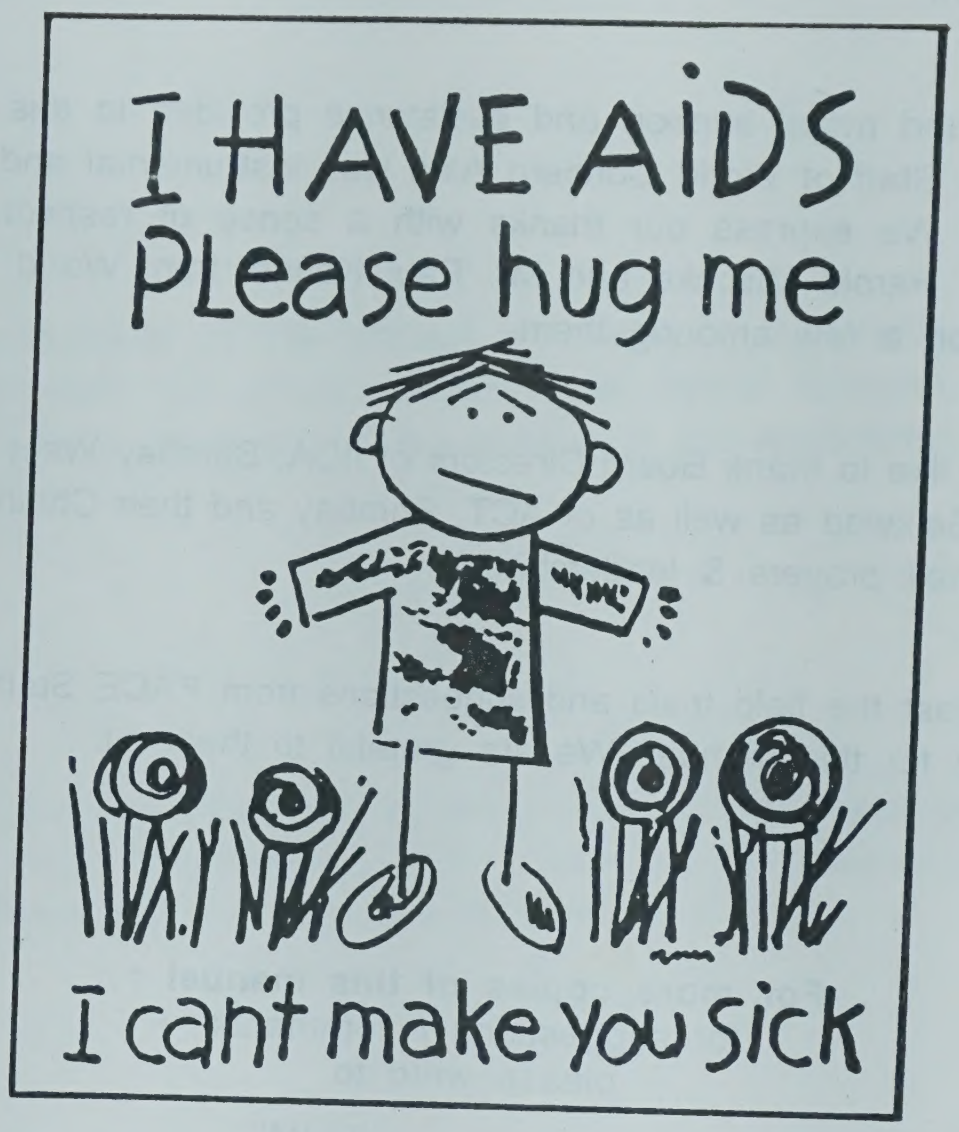
Last but not least the field trials and suggestions from PACE Staff & Volunteers were very vital for this manuel. We are grateful to them all.

For more copies of this manuel :
for suggestions / comments
please write to

ACT Training Program,
Training Councelling Office,
203-B, Nani Niwas (Ground Floor),
S. V. Road, Behind Kum Kum,
Vile Parle (W.), Bombay 400 056.

"ELIM"
IIDA/PACE PROJECT
19, August Kranti Marg,
Nana Chowk,
Bombay 400 007.

HIV & AIDS ARE NOT CONTAGIOUS



AIDS CLIPPING FROM CENTER FOR ATTITUDINAL HEALING CALIFORNIA.

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A MESSAGE FROM ACET

The AIDS virus, or Human Immune Deficiency Virus, popularly called HIV, has already infected hundreds and thousands of persons in India. It has reached almost all states, regions, groups, races and religious groups in India. It does not discriminate.

Most conservative estimates put the number of HIV infected in India at 1.2 million or more. Most of these people are in their youth or early adulthood. Unfortunately, most of them are not even aware of their infection and probably will not be until they develop symptoms. By the year 2000 most of these will be bedridden with the AIDS disease, awaiting their death.

It is estimated that if present trends of infection are not changed, before the end of the decade we may have over ten million HIV infected cases in India alone, and an additional one million new infections every year thereafter. There will be one million new AIDS cases by they year 2000 and one million additional cases each year.

the time to act is NOW. We need our best resources to be prepared to take care of HIV infected persons and symptomatic cases. We should start educating our people to the need of compassion, dignity, and care that is so highly vital for prevention of an AIDS epidemic. Care and counselling of HIV infected persons and of affected families will be an entry point for prevention of new infections and for alleviation of the sufferings inflicted by HIV or AIDS. We should sincerely dedicate ourselves to begin acting urgently to convert people to a safe living mentality, promoting faithful sex and righteous living and also provide them complete unbiased information and options with pros nd cons of each.

AIDS is spread by ignorance, insufficient knowledge and risk- taking behaviors. Understanding this is the key to stop the further spread of this human tragedy.

Participation and association with HIV infected persons and their families for care and education programs should be seen as highly essential for HIV epidemic prevention.

Permit me to conclude that the ultimate control of AIDS lies in faithful sexual relationships and responsible life styles. These values include love, compassion, care, and dignified treatment for HIV infected persons in our societies and communities.

WCDO Regional Office,
Bangkok Thailand

Dr. K. C. Nagpal
AIDS Education and Training Program
Bombay.

SIMPLE FACTS

AIDS is Acquired Immune Deficiency Syndrome.

1. AIDS is caused by a germ called HIV.
2. Once a person is infected, the virus may slowly destroy his natural defenses over many years without his realizing it.
3. An HIV infected person can pass on the virus without knowing.
4. Once infected with HIV, the person will remain infected for the rest of his life.
5. The person's blood and sexual secretions will be infectious to others for the rest of his life.
6. The person will remain healthy, normal and active for many years (perhaps eight to ten years) after the infection with the virus. Thereafter the symptoms will appear gradually at first, then health deterioration will increase rapidly.
7. Not all HIV infected persons will necessarily develop AIDS.
8. There is currently no medicine or vaccine to check the multiplication of the virus in the body. At best, a few costly drugs can only slow the process.
9. An infected person is not a risk to society. It is your own risk behavior with him or her which creates the risk factor for AIDS or HIV.
10. Knowing how one gets HIV and how to prevent it is very important; so is caring for an infected person.

AIDS VACCINE : There are over 100 drugs & vaccines undergoing trials for development of HIV preventive vaccine, vaccines to shlow impact of HIV infection in seropositive persons and protection from development of Aids & HIV related diseases. At least two vaccine trials in USA on non infected volunteers have begin and early reports have mixed results. Trials on chimpanzees indicated the very definite possibility of Aids vaccine before end of this decade. But till we have an effective vaccine, education & changing peoples behaviour is the best prevention and it is very cost effective.

IF YOU KNOW AND UNDERSTAND HIV .... HIV IS 100% PREVENTABLE

I CARE FOR YOU

Every 15 minutes a new person gets HIV infection from the Red Light districts of Bombay.

Every 17 seconds a new person gets HIV infection in India.

HIV stands for Human Immune Deficiency Virus, the virus which can lead to the development of AIDS, a disease now known and feared throughout the world. The box above shows just how prevalent this virus is in India today. What is our response to this problem ?

We have two responsibilities in meeting the concerns created by AIDS :

1. To keep ourselves healthy to avoid contracting the disease, and
2. To show compassion for those who have contracted it.

We can take the following measures to insure our own health :

1. Have sexual relationships with only one stable life partner
2. To appreciably reduce the risk of infection until you are absolutely sure your partner is not infected, use a condom. (While this reduces the risk, it does not completely eliminate it.)
3. Reduce the number of sexual partners you have and aim at having only one sex partner for the rest of your life.
4. Never share a needle or syringe for drug addiction.
5. If you are concerned about risk, obtain a blood test, particularly before marriage or planning a baby.

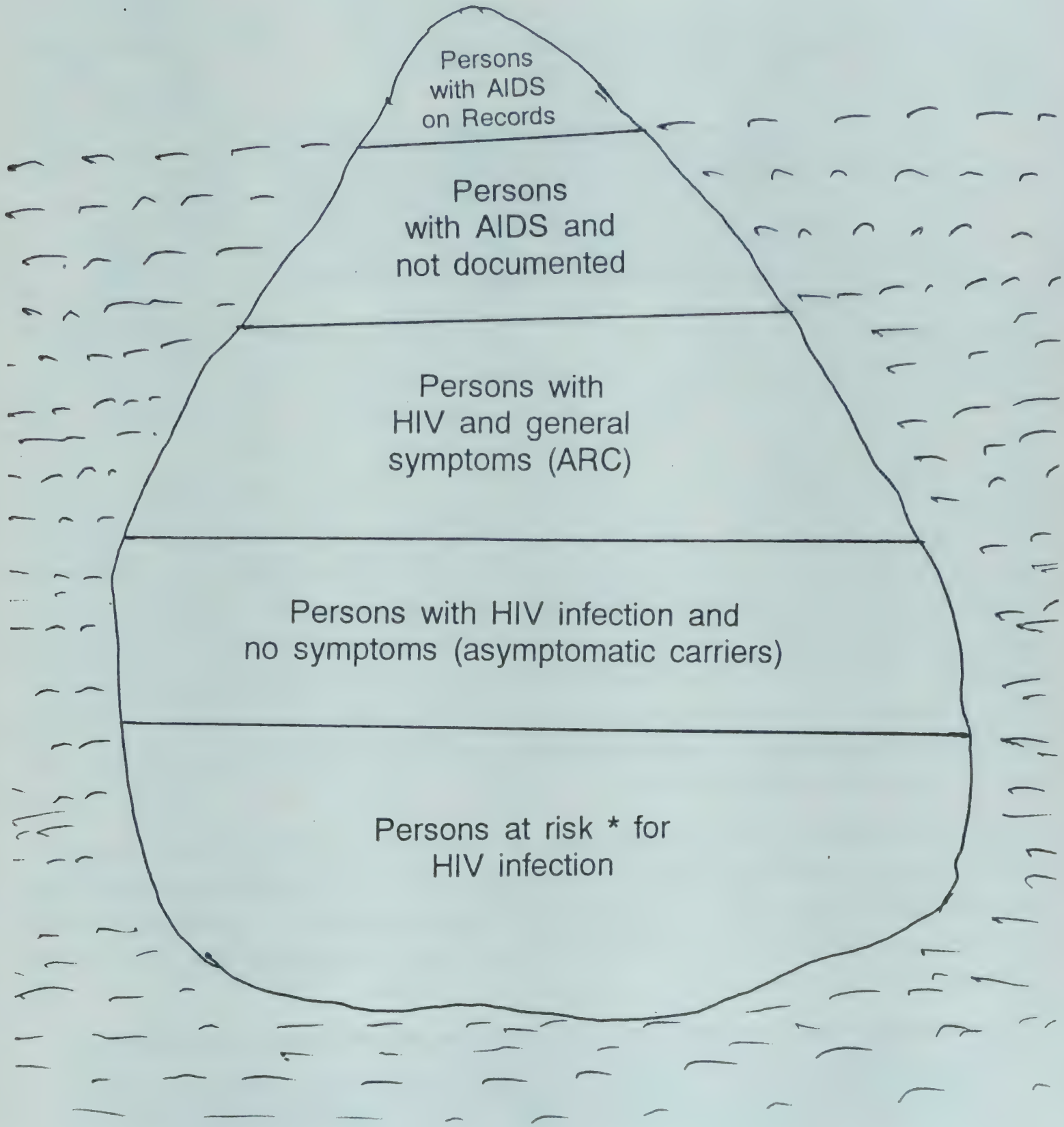
But many people have already contracted the disease. These people, like any sick people, need our understanding, compassion and care. We can begin with education - by learning more about the disease and how to care for those who have contracted it. We can then exhibit compassion rather than fear in our dealings with AIDS sufferers.

Touching and hugging an infected friend will not infect you. It will say, "I care for you."

HIV is not contagious and a hug does not spread aids.

TIP OF THE ICEBERG

What we see of the AIDS epidemic today represents only the tip of the iceberg.


Persons with AIDS on Records
Persons with AIDS and not documented
Persons with HIV and general symptoms (ARC)
Persons with HIV infection and no symptoms (asymptomatic carriers)
Persons at risk * for HIV infection

* Drug addicts, professional sex workers, professional blood donors, STD client multiple sex partners, recepients of untested blood, partners of above groups.

REMEMBER :-

Hetero Sexual transmission which includes sex with commercial sex workers, free lancing sex and multiple partnership in sex etc. can be a dangerous practice & is a leading mode of HIV Spread in INDIA.

Sexual intercourse, sharing a needle or syringe, or receiving a transfusion with untested blood could result in the virus being passed on without either partner knowing it.

> Heterosexual transmission is the single most important mode of HIV spread in India.

Sexual intercourse is absolutely safe only between mutually faithful partners, neither of whom has the HIV virus. This should be the culmination of a relationship that has progressed over time in mutual understanding, shared interests, and close friendship. Much more than physical attraction is needed to develop a strong, lasting relationship.

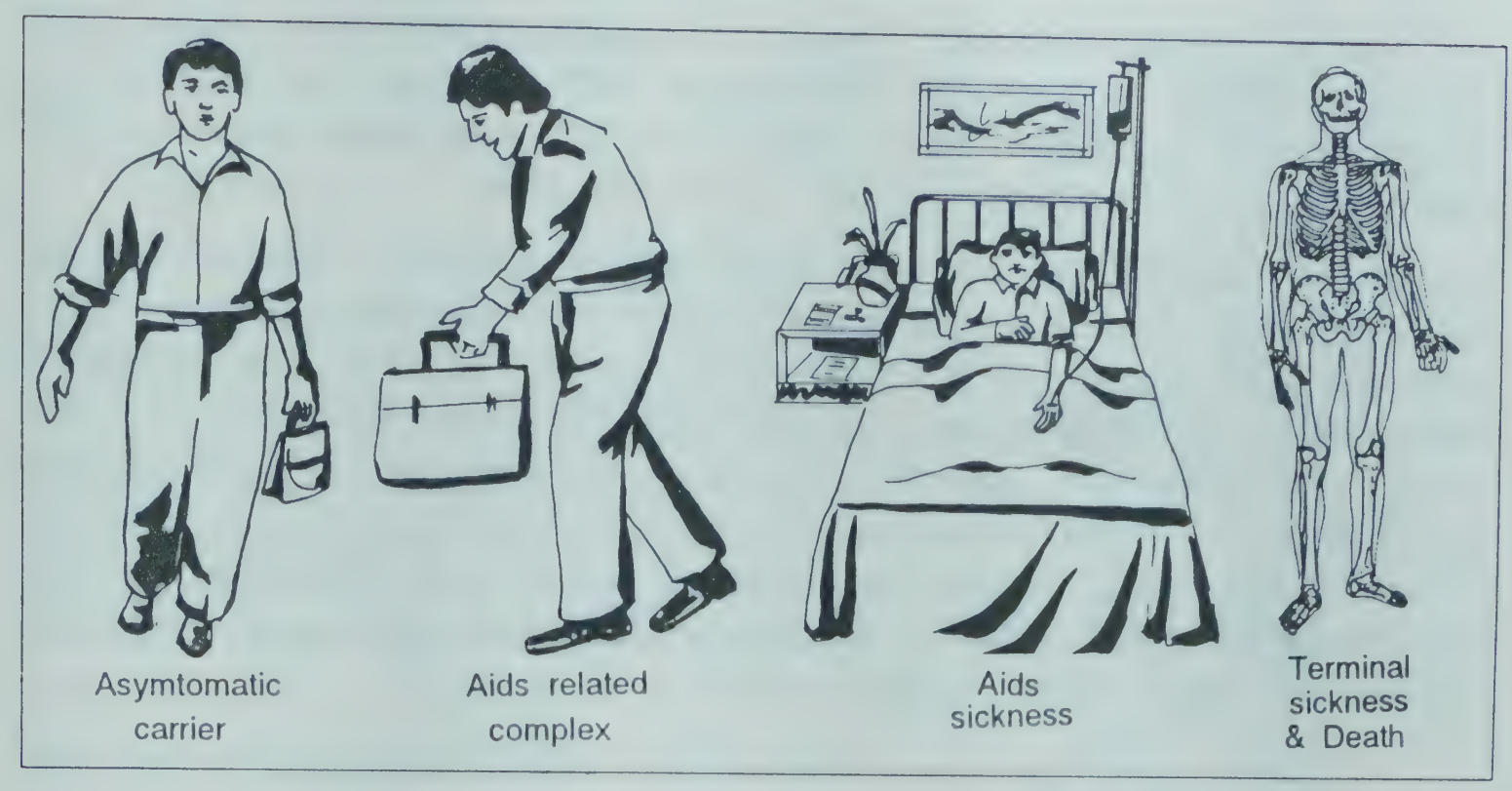
Many people believe that they are safe if they have had intercourse with only one other person. But if that person has had intercourse with only one other person who has had intercourse with an HIV infected person, the first person is at risk. Someone has pointed out that if a person had sex with six different people in his/her lifetime, and those six partners with 36 more, one person could receive sexually transmitted diseases from up to 40,000 other people !' Having sex with one person is the same as having sex with all of that person's partners as well, in terms of AIDS risk.

Close relationships that stop short of sexual intercourse are safe. Dating, hugging, dry kissing, or other activities that involve only skin-to-skin contact are safe. But abstinence until both partners are sure they are willing to make a lifetime commitment to one another (and neither has already contracted the virus) is the only sure way to avoid getting or giving HIV infection.

> Sexual abstinence, sexual fidelity and avoidance of drug abuse are the best ways to reduce the risk of transmitting any sexually transmitted disease.[2]

[1] HIV; It's Your Choice; ACET; London.
[2] HIV/AIDS and Children; Washington State Department of Social and Health Services.

AIDS Acquired Immune Deficiency Syndrome.



AIDS, **A**cquired **I**mmune **D**eficiency **S**yndrome, an infectious disease spread by a virus, is the final stage of infection with HIV. It is called a syndrome because it consists of several signs and symptoms. AIDS was first diagnosed in the United States in 1981, though it did not originate there. Since then there has been a rapid spread of the disease in Africa, Asia, Europe and America. Cases are being reported from around the world, and most countries now have people with AIDS or infected with the virus.

In India, early cases were reported in 1986. While the epidemic is still at the early stages, it is spreading more rapidly in India than any where else.

Since so much is already known about the virus and its prevention, India has a distinct advantage of having the potential to stop an AIDS epidemic, or at least to reduce its impact. India must learn, and learn today, from the experiences of African and other Asian countries, utilizing this knowledge to save millions of lives.

AIDS has **NO CURE, NO VACCINE, NO MAGIC POTION** to prevent it.

But **HIV infection is easily preventable,** and so is AIDS.

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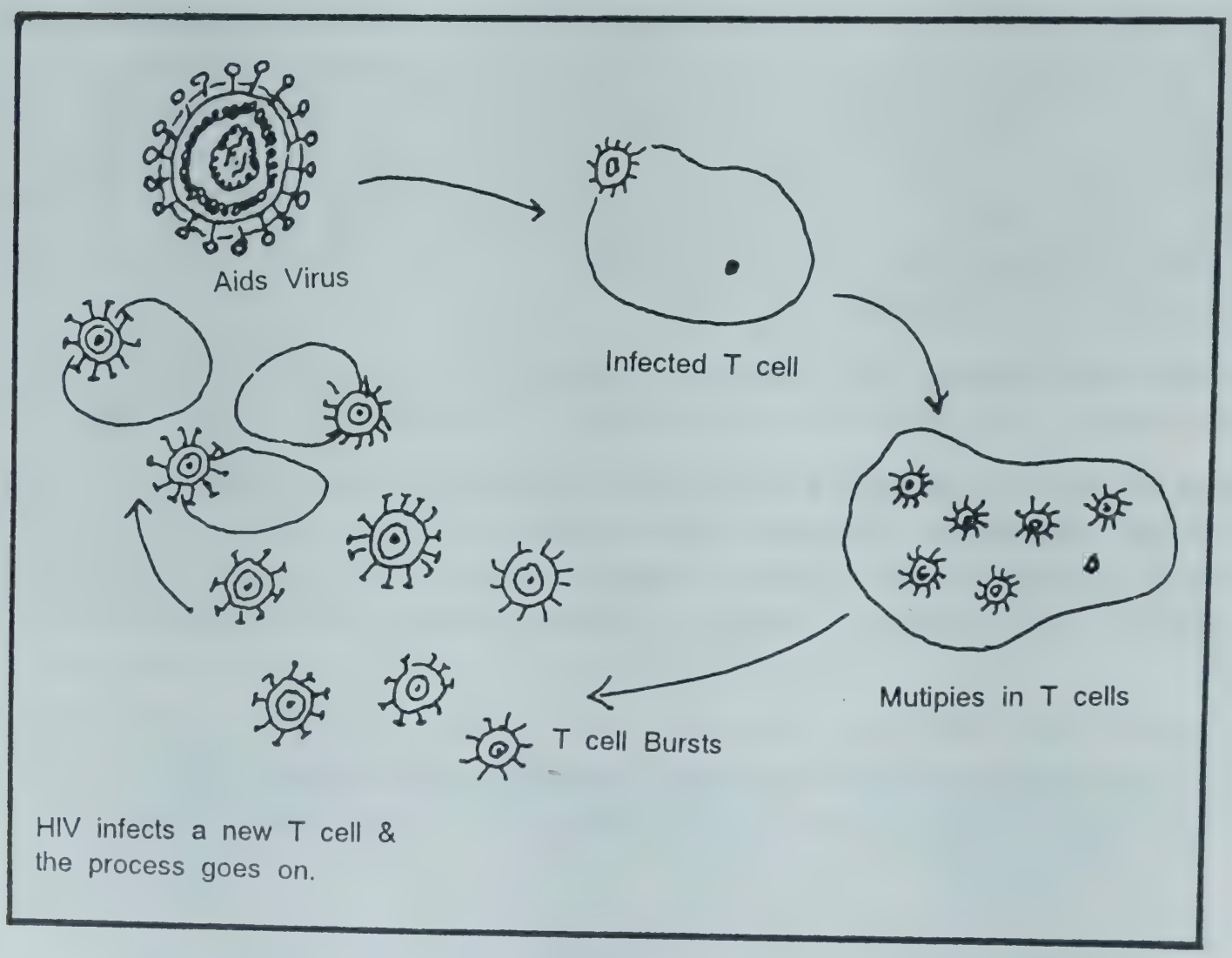
WHAT IS HIV ?

HIV, Human Immune deficiency Virus, is a retrovirus, a virus group about which little is yet known. HIV was first described in 1983 in Paris. The virus has had several names during its short history, but HIV has now been accepted internationally. Some people also call it the AIDS virus.

The virus enters the T-helper cells of the immune system. T- helper cells are the body's main defence against many infections and rare cancers. Inside these cells, the virus slowly but steadily destroys genetic material. The damage is permanent. After being infected with the virus, the T-cells themselves become virus-producing factories. Each T-cell produces hundreds or thousands of new viruses which are in turn released into the blood. The virus multiplication continues. In eight to ten years' time the population of T-cells is so diminished and the immune system so weakened that the person succumbs to opportunistic infections and cancers. the onset of these sicknesses is called AIDS.



HIV infects a new T cell &
the process goes on.

WHO IS A CARRIER ?

An HIV carrier is a person who carries HIV in his body, but who looks healthy and normal, without any external signs or symptoms. Anyone who has the virus is a carrier and can infect others.

Often the person does not know that he or she is a carrier. He has no symptoms of disease, and the person who infected him may have not have any symptoms either. A person can be a carrier unknowingly or many years before the virus has destroyed so much of the immune system that it cannot defend the body from infections and cancers which a healthy immune system would have dealt with effectively.

The body will produce antibodies three to six weeks after exposure to the virus. We can now learn by a blood test who is infected by testing for the presence of this antibody. Without a blood test we cannot tell who is infected. If may take two to fifteen years or more (average eight years) from the time of exposure until the person develops the symptoms which we call HIV disease or AIDS. But during this time the blood and sexual secretions of this person will be infectious.

Anybody with risk behaviours could be a HIV carrier.

A person exposed to HIV will know whether or not he has been infected with the virus only after an AIDS test eight to thirteen weeks (or longer) after exposure.

A positive test result does not mean the person tested has AIDS. It only signifies that :

1. He is infected with HIV.
2. He will be asymptomatic for many years, but infectious to others through the exchange of sex or blood.
3. He may develop AIDS sickness in eight to twelve years.

BLOOD TEST : Elisa or other Blood Test for HIV should never be given without proper education, Pretest counselling and consent of the client.

There are Two Types of Test available in Hospitals.

I. Screening Test – called Elisa Test

II. Confirmatory Test – called Westernblot Test

(A 3rd test called Antigen Test is available only in research centres).

HOW DOES THE VIRUS SPREAD ?

AIDS is spread when the blood, semen or vaginal secretions of an infected person come in contact with the blood or mucous membranes of a healthy person.

The virus is not very active, so the concentration of the virus in the fluid must be high to cause infection, or the person must be exposed to infection several times. The virus is spread :

— by sexual intercourse (homosexual, heterosexual, or orogenital) when one of the partners is infected.

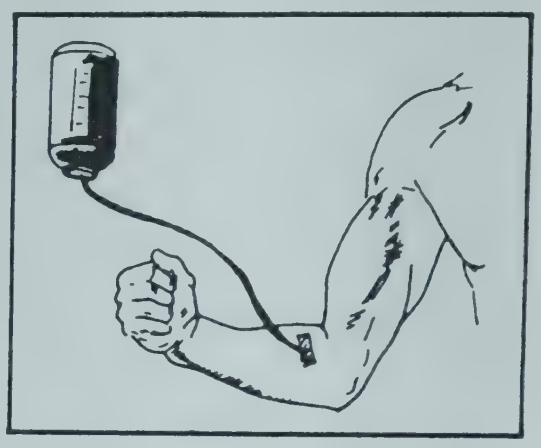
— by transfusion of infected blood or infected blood products; contaminated (unsterilized) needles, syringes, or sharp instruments; and organ transplants from infected persons.

— by an infected mother to her unborn child (in the womb or during delivery). Babies feeding on breast milk of infected mothers may contract the virus in a few cases.

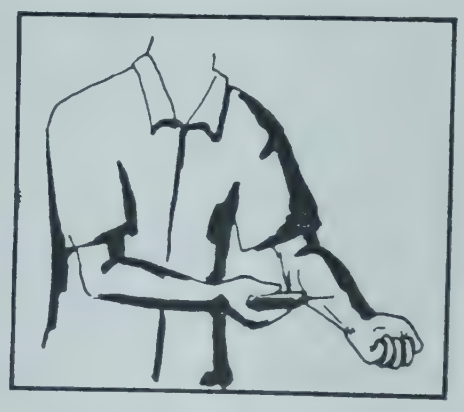
The most important thing to remember is that EVERYONE WHO IS INFECTED WITH HIV - whether or not they have symptoms - CAN TRANSMIT THE INFECTION TO OTHERS.

Sexual Intercourse

Infected pregnant woman to her baby in womb



Infected Blood Transfnssion.



Injection with contaminated Needles

CASUAL TRANSMISSION DOES NOT HAPPEN

Shaking hand / Touching

The virus is not spread through every day social contact such as :

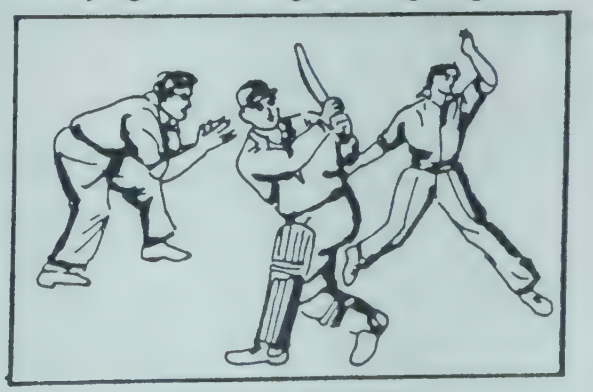
— shaking hands, hugging, touching
— living together
— travelling together
— playing together
— sharing equipment
— eating together
— social kissing.

HUGGING AN INFECTED PERSON CANNOT SPREAD THE AIDS VIRUS.

It is not spread by :

— food
— water
— utensils, dishes and kichenwares
— mosquitos or other insects
— animals
— toilet seats, washrooms, urinals
— clean linens

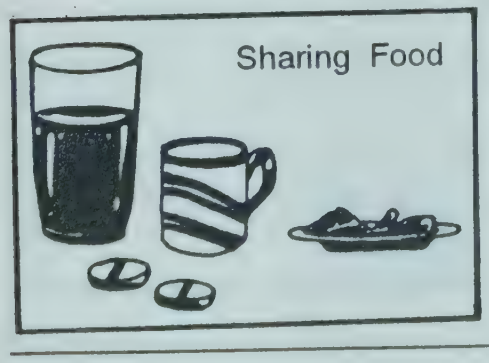
Staying / Working / living together



Playing together

It is not spread by :

— talking, coughing, sneezing
— droplet infection or tears
— swimming, bathing
— nursing care to an infected person.

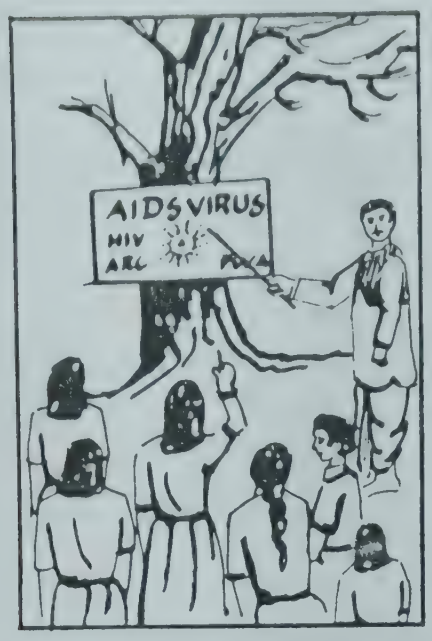


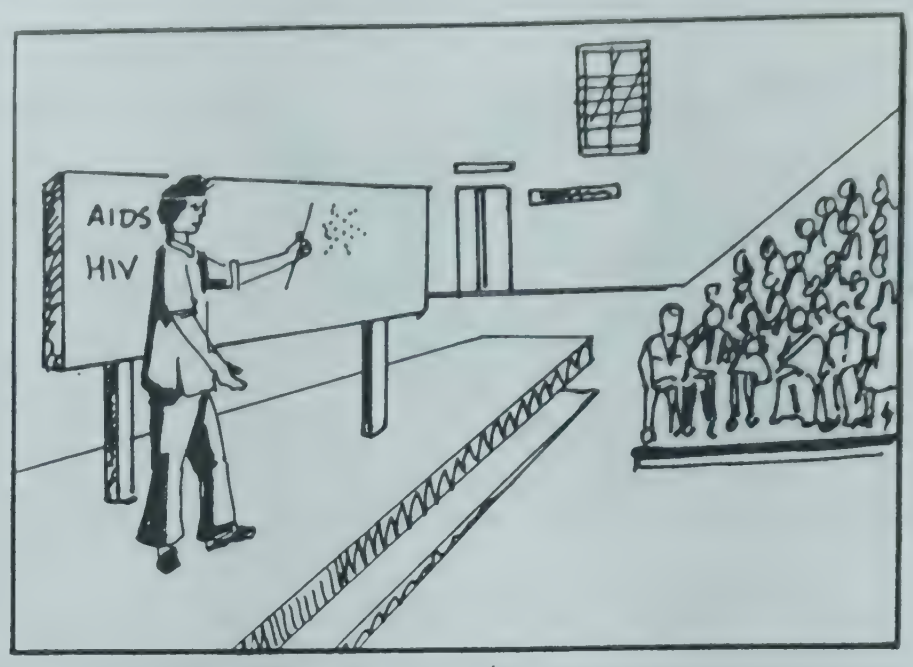
Studying & Social Mixing.

AIDS & HIV infections are not contagions

HOW CAN THE SPREAD OF AIDS BE PREVENTED ?

There is no vaccine against AIDS. There is no medical cure as yet to eradicate the virus from an infected body.





Only understanding and knowledge of simple facts about the AIDS virus can help prevent the further spread of HIV

Health education is the only effective tool for preventing the spread of AIDS. Everyone should know how to protect themselves from infection from AIDS and STD's Everyone must understand how to live a responsible life. The whole community should be involved, and a simple and complete information package available to all. Advice must be translated into practice.

IF...

1) You think you may have already been exposed to the virus by practicing sex with multiple partners or otherwise;

2) You are worried that you may have symptoms suggestive of AIDS or ARC (AIDS Related Complex);

3) You have legitimate concerns for the safety of your life partner or your unborn baby;

4) You were treated for STD's or have had drugs by sharing injections;

THEN, a simple blood test and counselling can improve your knowledge and help you start a life with safe behavior. AIDS today is totally preventable.

WHO SHOULD BE INFORMED ?

EVERYONE

Women....

housewives, office workers, professionals, university students, adolescents.

Men...

labourers, taxi drivers, professionals, single or married, young or old, at work, at home, enjoying recreation.... everywhere.

Students & Office goers

in high school and adolescents in universities must understand simple facts about HIV/AIDS.

Growning persons of every Age & Both sexes

WHAT IS A RESPONSIBLE LIFESTYLE ?

The AIDS virus is spread through exchange of semen, vaginal secretions, and blood. Therefore :

— Have sex with **only one faithful partner.**

Stable sexual relationship between Husband & Wife only.

— Use latex condoms unless you know that neither you nor your partner is infected. Use it properly and use a new one for each sex act. (While this reduces risk, it does not eliminate it entirely.)

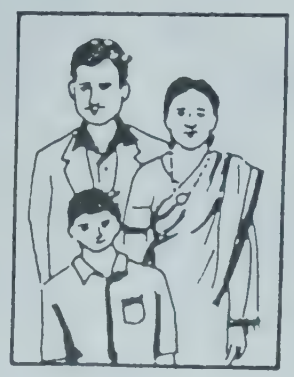
— Do not have sex with commercial sex workers (male or female), unknown or casual partners, or with those who do have sex with them.

— Do not have injections or blood transfusions except in a recognized health institution where you should also be certain that the instruments are sterilized and blood is screened for HIV.

— Make sure the instruments that puncture the skin for surgery, dentistry or wound cleaning, etc., are boiled; and that razors, etc., are not contaminated at the hair dressing salon.

Donation of blood is safe. You cannot get HIV by donating blood if sterilized needles and a sterilized blood set is used.

Receiving blood transfusions may be risky if the blood was not properly tested for HIV before transfusion.



Fidelity will keep your family Happy

WHO IS AT RISK FOR INFECTION ?

Everyone who.....

... has recently taken a risk or practiced a risk behavior, particularly since 1986. Such persons should go for a blood test.

... is exposed to the virus through risk behavior knowingly or unknowingly.

... has a venereal disease or sores on their genitals.

... has had many sexual partners.

... is a commercial sex worker (male or female), a freelance sex adventurer, or who had sex with an unknown partner.

... has received an injection with non-sterile equipment.

... is a drug addict or has injected intravenous durgs.

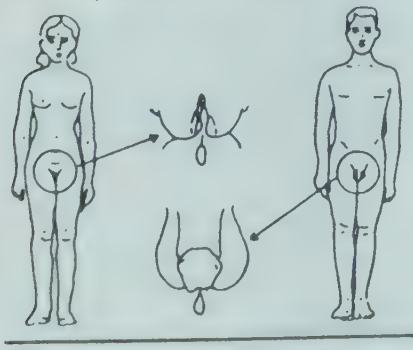
... practices unsafe sex or indulges in drinking alcohol prior to or during sexual activity. (Durgs or alcohol may lower inhibitions, as well as decrease co-ordination which may lead to condom being forgotten or put on incorrectly.)

... has received an untested blood transfusion or has bought and transfused blood from professional donors. Blood transfusions from blood other than tested blood from trustworthy, safe donors can be potentially harmful.

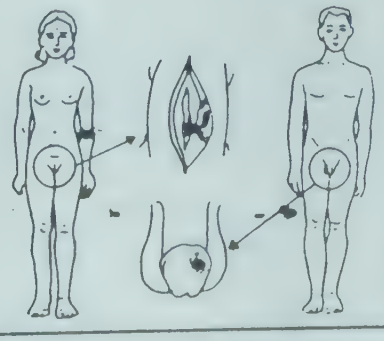
... is a partner or spouse of any member of the above groups.

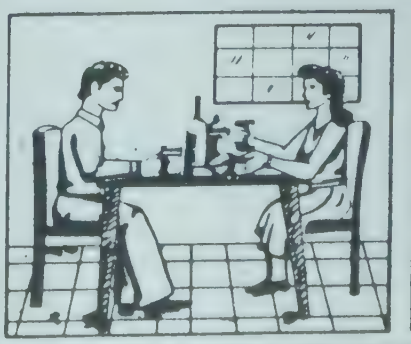
HIV is one of the newer members of STD's (Sexually Transmitted Diseases) which also include gonorrhea, syphilis, herpes, genital warts, chlamydia, and non-specific urethritis. Soreness in the groin or n unusual discharge from the genitals can be tell-tale signs of some common STD's; but often the person infected does not notice anything wrong. A through case history is highly important for an intelligent diagnosis of an STD.

In confidence share all your history with your doctor, counseuor or A health worker. Do not shy away (conceal) any information even you may feel how unimportant that may be."



STD Problems





Free Sex & Drug Addictions or Alcohol

Sex workers & their clients

AIDS AND PREGNANCY

AIDS can spread from the mother to her unborn child during pregnancy or delivery.

Pregnancy may cause the onset of the symptoms of AIDS in a HIV positive woman.

A woman who knows or suspects that she is an HIV carrier should avoid becoming pregnant and consult her doctor/counsellor for advice.

A woman who wants a baby and is unsure if she is an HIV carrier, should get her blood tested before she plans her family.

Couples who are not sure whether or not they are infected should have their blood tested before getting married. Talk more about this to your doctor or counsellor.

One of every three babies born to infected mothers will be infected with HIV at birth.

1/3 Infants born to infected mothers may be infected with HIV

For the remaining two-thirds of the babies (not infected at birth) born to infected mothers, the confirmation that they were free of HIV infection may take 15 to 18 months. The child may have antibodies from his mother up to that point and may test positive. After that time a positive test result indicates that the child himself is infected and a negative test that child is not infected with HIV.

An HIV positive baby will develop AIDS symptoms in a shorter time than would an older HIV positive person. Few such babies will live to celebrate their fifth birthday.

1. The normally done AIDS Elisa test only detects antibodies "A protein produced by the body in 3-6 weeks after infection with HIV.
2. Newer tests are being invented and it is hoped that in near future we will be able to detect quite early and may in mother's womb which baby was infected and which one was not.

BREAST FEEDING CAN SPREAD HIV.

The HIV virus has been found in breast milk in lesser concentration than in blood & sexual secretions. There are some chances that this low concentration can infect a baby who is breast fed.

The alternative to breast feeding is bottle feeding but knowledge hygienic technique of bottle feeding is very low in developing countries. Therefore at the present time, the risk of life-threatening disease from bottle feeding is greater than the risk from breast feeding from an HIV infected mother. An HIV infected mother should consult a health centre before making a final decision on whether or not to breast feed her baby.

Alternatively you can offer a different solution to the issue depending on Family's financial status and the Mother's Educational level.

1. When Mother can afford Bottle feeding and is well trained-in techniques of Bottle feeding, the child should be given fresh milk or a baby formula. Proper hygeninc advise and close co-ordination between the Mother and a Doctor or Nurse is very important in this programme.

2. When Mother is from a poor socio economic class and cannot afford to buy Baby Formula from the Market. Unless the Mother is fully trained about hygienic technique of Bottle Feeding and promised by a Social Organisation regular supply of Baby Formula or Fresh Milk she should not be advised to stop Breast Feeding.

   In situations when less educated (illiterate) mothers have enough supply of Baby Milk Formulae a Counsillor or Home Care Educator should need to make sure that the advise and proper technique of bottle feeding was adhered to and was well understood.

   Health of these children when starts detoriating with problems like frequent diarhoea and other infections proves poor bottle feeding techniques or personnel hygiene.

3. Experts agree that all Mother's irrespective of their being HIV positive or not MUST Breast Feed their Babies, if not advised otherwise by their Practitioners or Counsellors.

   All HIV positive Mothers must consult their Doctors or Counsillors before they decide to stop Breast Feeding their Babies.

AIDS AND IMMUNIZATIONS

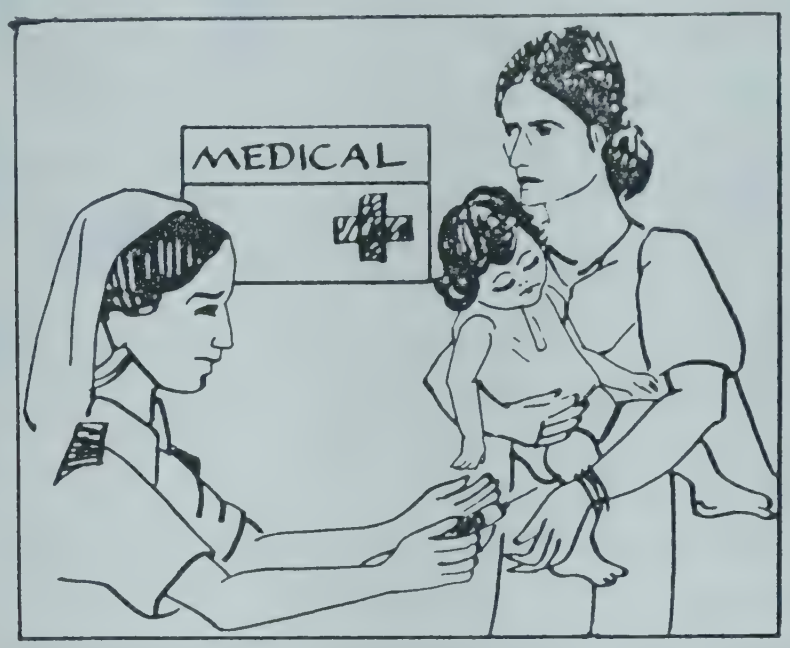
The syringes and needles used in immunizations are possible sources of infection.

Each child should be immunized with a sterile needle and syringe. These must be boiled for 20 minutes in clean water. You can also sterlise needles / syringesings in a normal pressure cooker by giving - 3 whistles or boiling for 15–20 minutes would complete the sterlisation.

After a disposable needle is used, it should be put into a closed container and buried or incinerated if possible.

Blood should never be aspirated into the needle and syringe or a pipelte.

There is no risk of spreading AIDS through immunization programmes as long as needles and syringes are adequately sterilized.



Immunisation ✓

Remember all infants and young children including those with AIDS or HIV must be immunised with DPT (eq for Diphtheria, Pertussis and Tetanus) Three doses at monthly intervels; with oral polio drops three doses at monthly intervels; for measle at 12 month of age or after as single dose to complete primary.'

Immunisations

BCG inoculation should be given at birth or as soon as possible to all infants included those infected with HIV. BCG should not be given when Aids sickness has already started in the child.

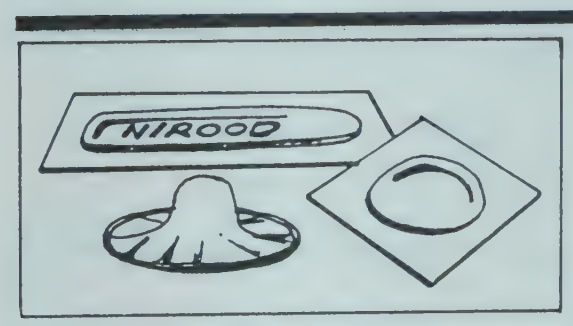
Remember HIV Epidemic has taken momentum, TB Epidemic is within sight and furry of Aids Epidemic will be a catastrophiy before yr 2000.

WHAT THE HIV-CARRIER SHOULD KNOW

Persons who suspect or know that they are HIV-carriers should :

- Always seeks regular counselling.
- Avoid being infected by STD's (sexually transmitted diseases).
- Avoid spreading the infection by :
  - abstaining from sexual intercourse, or
  - using good quality latex condoms as advised
  - not donating blood, semen, or organs for transplant
  - informing their care providers that their blood and sexual secretions can spread HIV
- Say no to smoking, drugs and alcohol (these weaken the immune system).
- Treat other infection, such as :
  - tuberculosis
  - venereal diseases

Most importantly : maintain a **positive attitude**, eat a **balanced diet**, and **exercise regularly** to boost the immune system.



Use A Condom

Counselling

Eat Good Food

Play and be Happy

Rest
&
Work

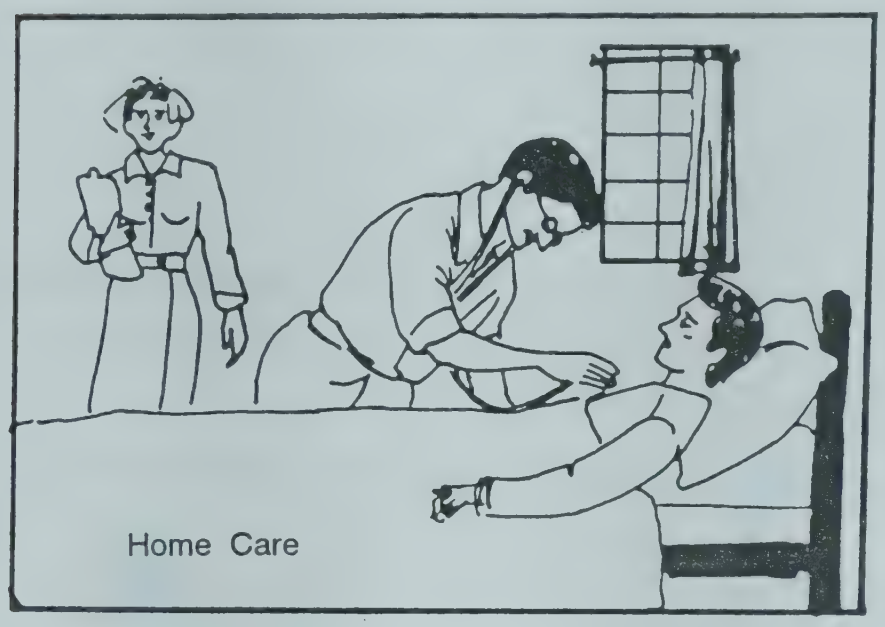
In confidence share all your history with your doctor, counsellor or A health worker. Do not not shy away (conceal) any information even you may feel how unimportant that may be.

HOW TO CARE FOR A PERSON WITH AIDS

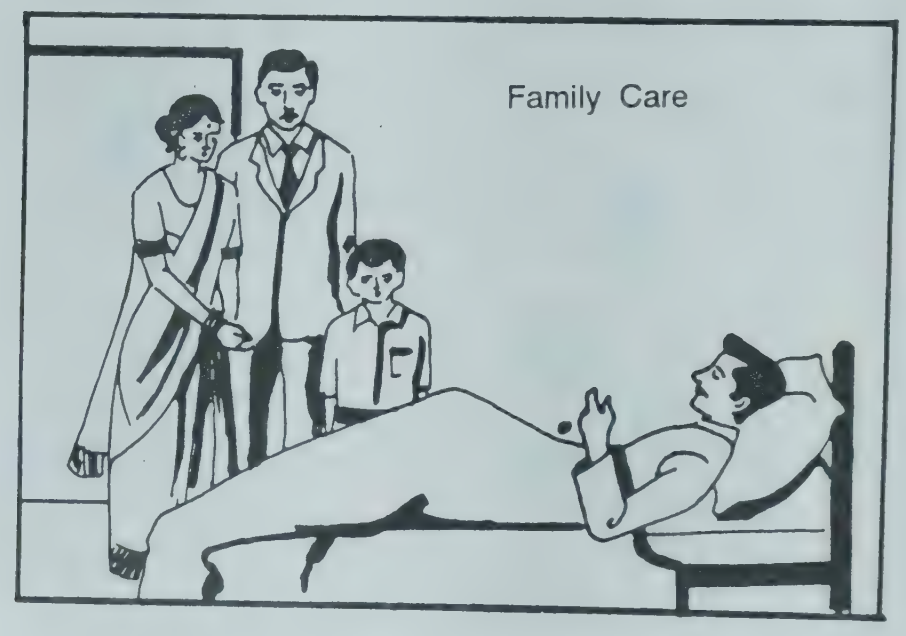
Remember that people with AIDS are in need of social contact and support, just as we are. Their skin or breathing does not transmit the infection, and they need physical and psychological closeness, as well all do.

They may know they have a deadly disease, especially after learning the diagnosis. This can cause fear, anxiety and anger. Health personnel and relatives should be prepared for this. People with AIDS need time and help to struggle with these feelings. They need someone who is prepared to listen and support then. They need to be encouraged to continue to take part in daily activities as much as they can.

Perhaps they want to talk to a pastor or counsellor or someone else who can give them spiritual and emotional reassurance. You should encourage this and help to arrange it.



Home Care



Family Care

DIAGNOSIS OF AIDS

Some people pass through a first stage similar to a bad cold, with fever and throat infections. They can then be without symptoms for many years (an average of eight to ten years).

For some period of time before the final diagnosis can be made, the person may suffer from different symptoms of infections. They are grouped into what is called ARC (AIDS Related Complex). These symptoms are general symptoms common in life. However, ARC symptoms are more severe, last for a longer period, and do not respond easily to treatment. Some of the common symptoms are :

— persistent fatigue and noenergy to work
— unexplained weight loss as much as 10% weight in loss 4-6 weeks.
— diarrhoeal episodes not responding to treatment and lasting 3-4- weeks.
— painless enlarged lymph glands in the neck, armpits or groin
— night sweats & low grade fever
— thrush (a tick, persistent whitish coating on the tongue or throat)

These common symptoms are enhanced in HIV infected persons because of the damage to their immune systems and also direct affects of HIV infections.

As the damage to the immune system becomes more severe, many life threatening infections and cancers appear. We call this group of diseases AIDS. Some common diseases seen in AIDS patients are :

— severe tuberculosis, extra-pulmonary TB, and atypical TB

— a severe type of pneumonia called PCP (Pneumocystitis Carini Pneumonia), which causes shortness of breath and a heavy cough

— brain infection which causes confusion and memory loss

— cancers, such as skin cancers, lymph node cancers, etc.

The manifestations of the disease vary widely throughout the world. Some signs and symptoms, such as tuberculosis, are more common among Indian patients.

The symptoms of AIDS are the same as for many other infections. A final diagnosis can only be made through blood tests.

DIAGNOSING AN ADULT WITH AIDS
WHERE THERE IS NO BLOOD TESTING FACILITY

The diagnosis of AIDS may be indicated by at least two of the following major signs and one of the minor ones :

MAJOR SIGNS :

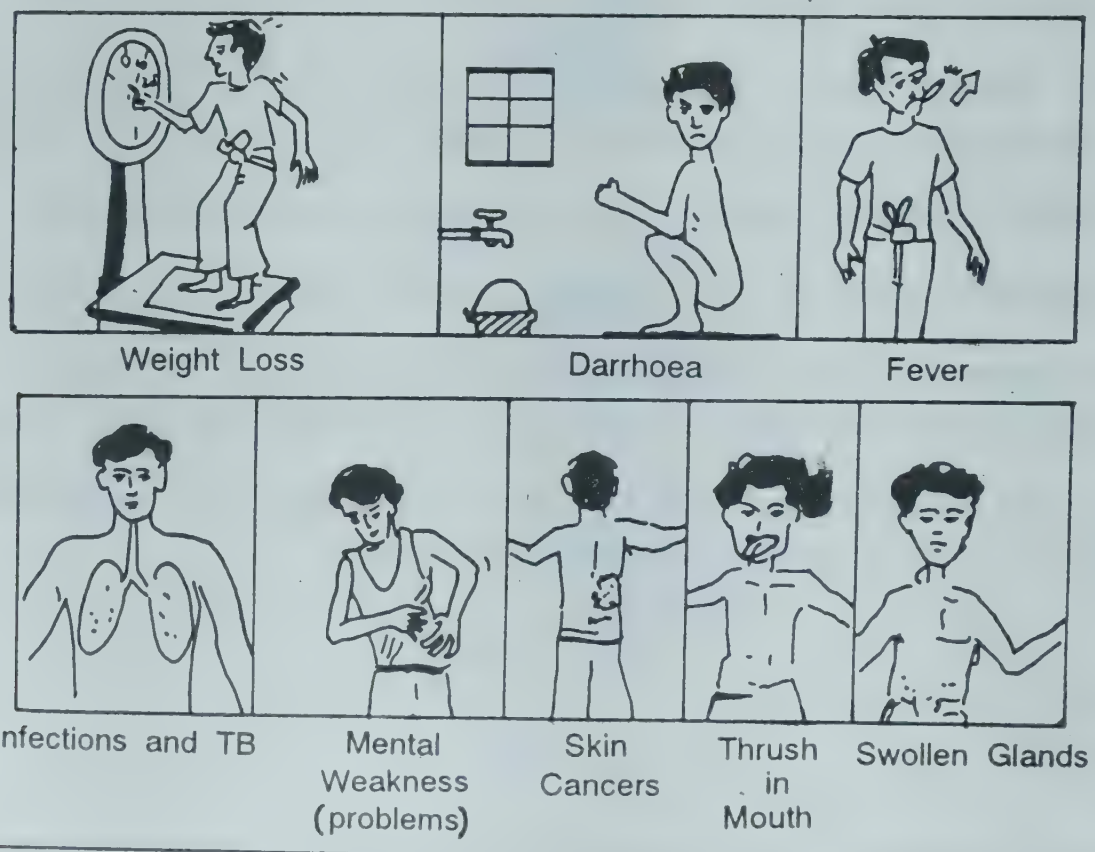
- loss of more than 10% of body weight in six to eight weeks
- chronic diarrhoea for more than one month
- prolonged fever for more than one month

MINOR SIGNS :

- persistent cough for more than one month
- generalized itchy skin disease
- recurrent herpes zoster
- chronic, generalized herpes simplex
- thrush in the mouth and throat
- swollen glands

AIDS should be suspected if the symptoms persist, especially in an area with many people with AIDS and HIV infection.

People showing these symptoms should be sent to the nearest service for blood testing.



DIAGNOSING A CHILD WITH HIV AND AIDS

HIV POSITIVE

You cannot tell for certain for the first 18 months if a child has been HIV infected by his mother by a blood test alone. After approximately 18 months the mother's antibodies will disappear. A positive test result after this time indicates that the baby has been infected with the HIV virus.

DIAGNOSING OF AIDS WHERE THERE IS NO BLOOD TEST

To make the diagnosis of AIDS, you should observe at least two major and two minor signs evident in the child.

Infected Baby develops Aids earlier than an adult

Major Signs :

— weight loss or slow growth
— chronic diarrhoea for more than one month
— prolonged fever for more then one month

Minor Signs :

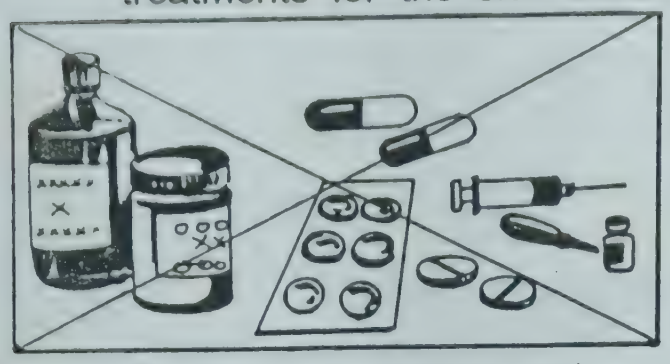
— generalized swollen glands
— thrush in mouth and throat
— repeated common infections
— persistent cough
— generalized skin disease

Many children have these symptoms, but if one or both parents is HIV positive, the diagnosis is more likely to be confirmed.

If a blood test is available, a positive test in a child showing the above symptoms suggests the onset of AIDS.

HOW TO TREAT A PERSON WITH AIDS

There is still no drug available to cure AIDS, but there are a number of satisfactory treatments for the sicknesses of AIDS.



Yet there is no treatment and no vaccine for Aids

A few drugs, such as AZT, may make symptoms less severe, but they offer no real gain in longevity of life. The results of studies to determine the benefits of this drug are not clear. AZT cannot eradicate the virus and produces many side effects. Such drugs are too expensive and limited in supply to make them a real option in India.

Suffering patients need quick relief from their symptoms, but the damage to their immune systems makes this a real challenge. As they cannot effectively fight these infections, they become more depressed and anxious. A patient, loving and compassionate care provider can make a remarkable difference in the lives of such patients. The care provider should be willing to devote the necessary time to do everything possible to make the patient feel comfortable.

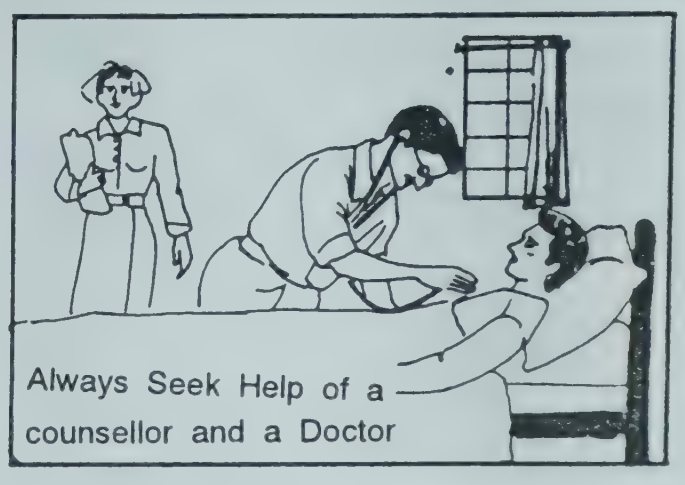
In places where herbal medicines are traditionally used, their use should be encouraged to relieve pain, itching, fever, or other symptoms. These medicines will also alleviate the anxiety in patients with AIDS.

Encourage AIDS patients to :

- eat a good diet
- get plenty of rest and exercise
- participate in social activities
- keep occupied in work and other activities to the best of their physical abilities
- maintain a positive attitude toward life
- take steps to prevent STD's, tuberculosis, and other illnesses
- have quick and regular consultations for their health problems.

These steps will help boost the patient's immune system and feeling of well-being.

Proper Feeds & Love is important for Healing



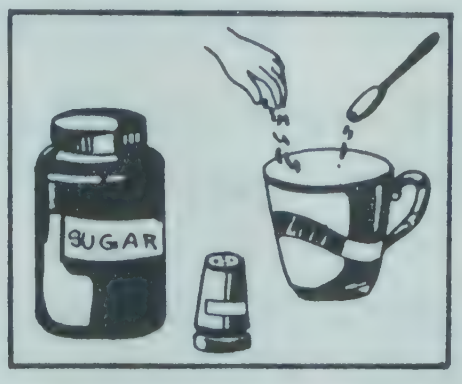
Always Seek Help of a counsellor and a Doctor

SYMPTOMATIC TREATMENT

DIARRHOEA

Diarrhoea is a common symptom, especially among children. As in the case of any type of diarrhoea, it is important to prevent dehydration.

To treat diarrhoea, give :



— salt-sugar solution.

— oral rehydration solution.

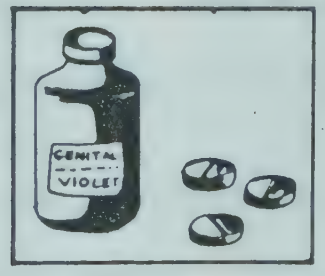
— plenty of fluids

— a soft diet.

It the patient vomits frequently, if his health deteriorates, or if diarrhoea does not stop in a few days, consult a doctor.

THRUSH

Thrush is a white coating in the mouth and on the tongue due to a fungal infection, It creates a foul smell. If it is associated with swelling of the mouth of difficulty in swallowing, a doctor should be consulted.



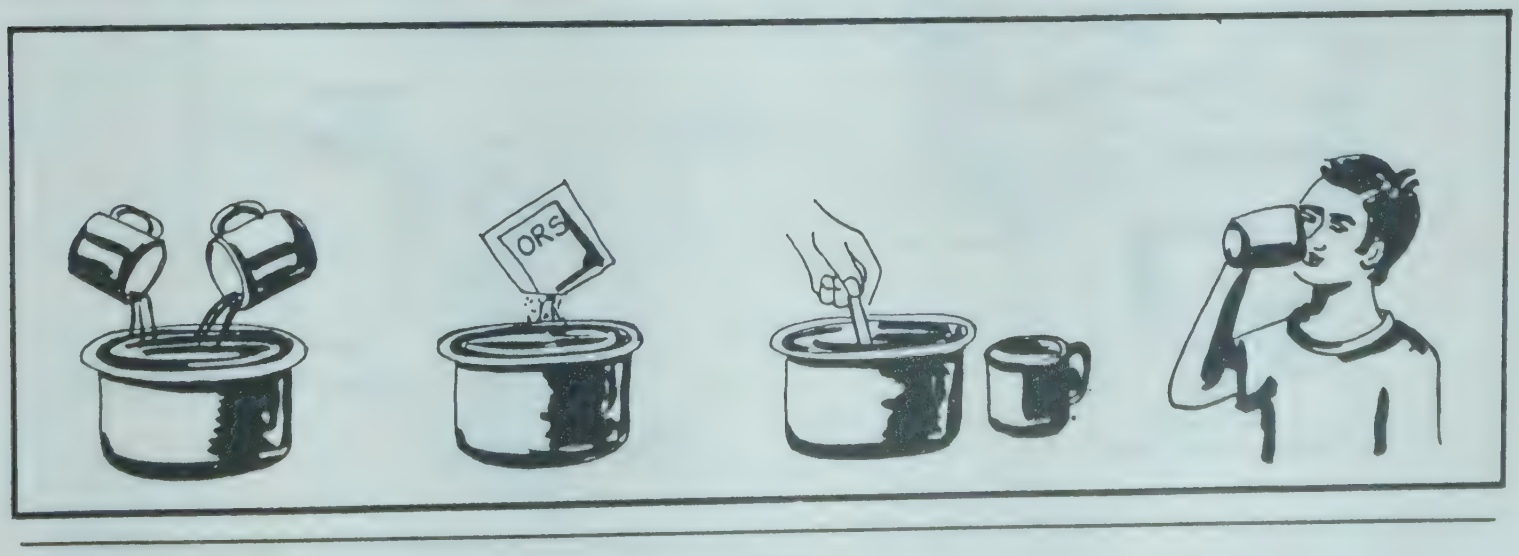
Treat thrust by :

— painting with gentian violet

— rinsing with mineral water.

HERPES ZOSTER - It is caused by same germ (virus) which causes chicken pox. Many small vesicles (grape like swellings) appear on skin which are very painful. There for other name for it is painful blisters or shingles.

1. Treat pain with aspirin or paracetamol.
2. And apply gentian violet.
3. Cold compression will soothen the burning sensations.



FEVER

Fever is a common symptom in both adults and children.

Treat fever with :

— plenty of fluids and a soft diet

— bath and rubbing with a cool cloth

— aspirin or paracetamol

Keep a record of the temperature and seizures, if any.

COUGH/PNEUMONIA/EAR INFECTION

Treat by :

— administering a course of antibiotics, after first checking possible allergy to antibiotics

— giving symptomatic treatment for cough, fever etc.

— watching breathing closely and seeking help when warranted.

ITCHING SKIN

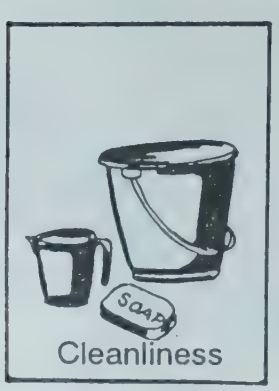
Treat with :

— antihistamine

— pain reliever

— soap and water cleaning

— avoiding applications and clothing which cause allergy.



WHERE SHOULD A PERSON WITH AIDS BE TREATED ?

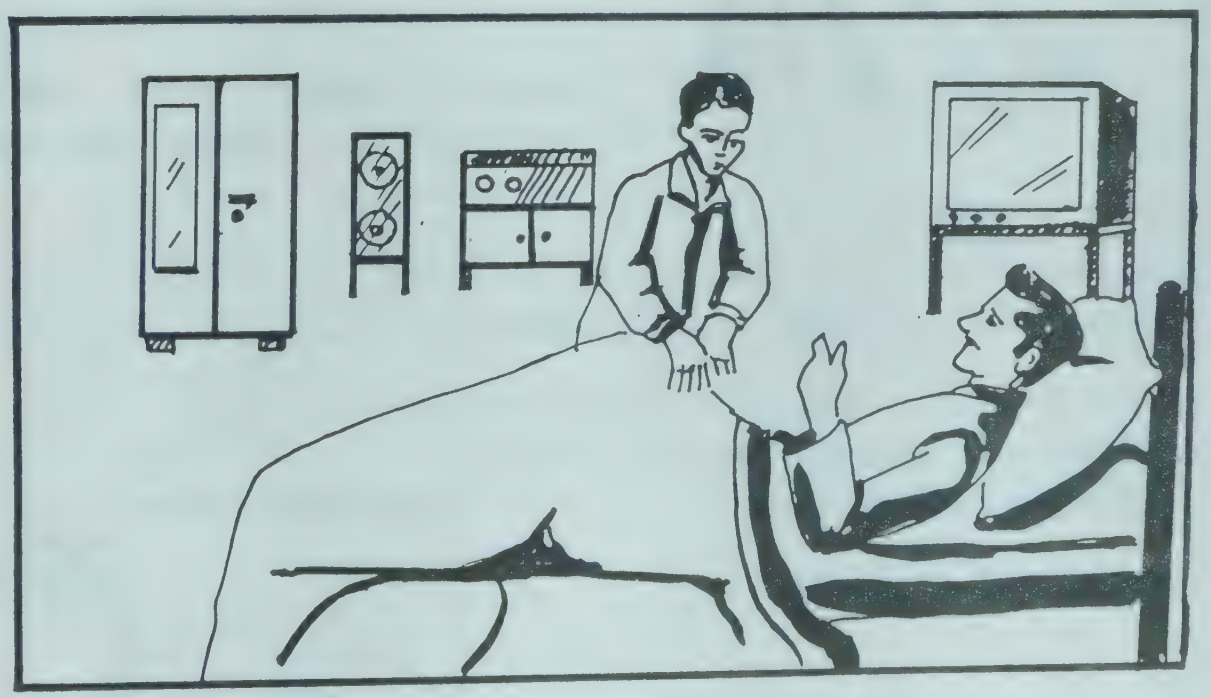
Home care in the communities and by families is the most viable answer for AIDS patient care programmes. Persons who can be cared for at home should be cared for in that setting. Families can respond better to the social and psychological needs of their sick members.

Patients who suffer badly from fever, diarrhoea, and pain may need to be cared for in a medical institution for a period of time. They will need symptomatic treatment and nursing care.

Admission to the hospital will be required only periodically and in the last stages of the illness when the patient incurs diseases like pneumonia or cancer, or is experiencing mental problems.

Between acute episodes and for many years before acute illnesses occur, patients can be managed with efficiency and care in the home and through out-patient clinics.

Hospices are not as appropriate as home care in the cases of families with support from home care teams. However, hospices may offer an alternative in some cases.



Home care is the Best care

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PATIENT CARE IN THE HOSPITAL / HEALTH CENTRE

Isolation

There is no need to isolate AIDS patients for the sake of protecting others from the infection. It may sometimes be necessary, however, to isolate the patient to protect him/her from surrounding infections. This is known as barrier nursing.

Personal hygiene

AIDS patients should be helped with their personal hygiene, just as any patient should. This normally poses no risk to the care giver, though there are some things to keep in mind :

— Soiled or bloodstained linen can transmit the virus.

— Bleeding or infected wounds can transmit the virus.

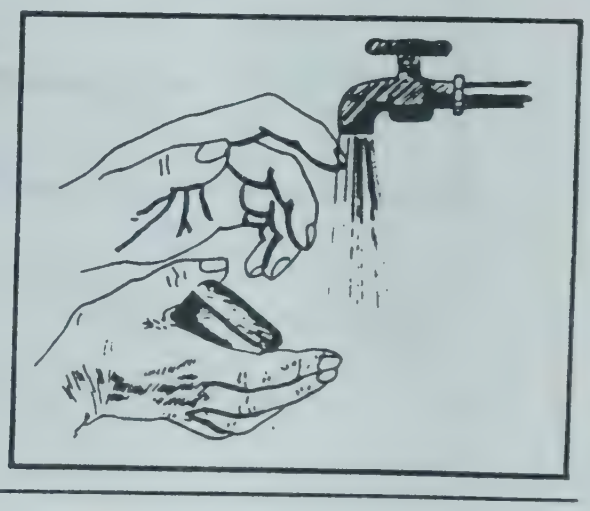
— Needles, razors, toothbrushes, or items which could possibly become contaminated with body secretions should never be shared.

— Sanitary towels, pads, disposable nappies, etc., should be burnt or incinerated.

— Toilets, wash basins, etc., should be cleaned with normally - used disinfectants.

— Blood or other body fluid spills should be cleaned with common bleach and should not be touched directly.

— Wash hands frequently.



HOW TO HANDLE INFECTED EQUIPMENT

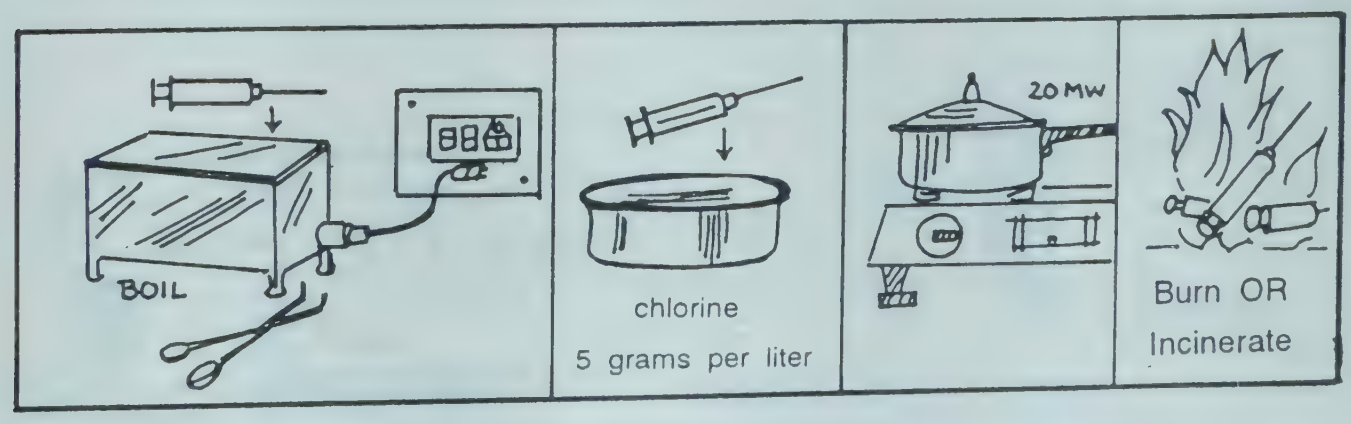
The AIDS virus can spread through the use of syringes, needles, and other instruments which have been in contact with the blood or body secretions of a person who is carrying the virus, even if he is not sick. It is therefore very IMPORTANT to use only STERILE syringes, needles and instruments. The virus can be easily killed. It dies at only 56° C, or when soaked in common disinfectants for 20 to 30 minutes.

There are three ways to sterilize equipment :

1. boiling for 20 minutes
2. steam or pressure cooking, autoclaving
3. soaking for 20 minutes in disinfectant solution, e.g.,
   - — chlorine : 5 grams per liter water, or 1 part household bleach per 10 parts water
   - — alcohol : 700 grams ethanol in 1 litre water

Solutions should be prepared fresh daily, as they loose strength over time.

Disposable syringes, needles or instruments should be discarded properly, either by burning and burying or by incinerating.



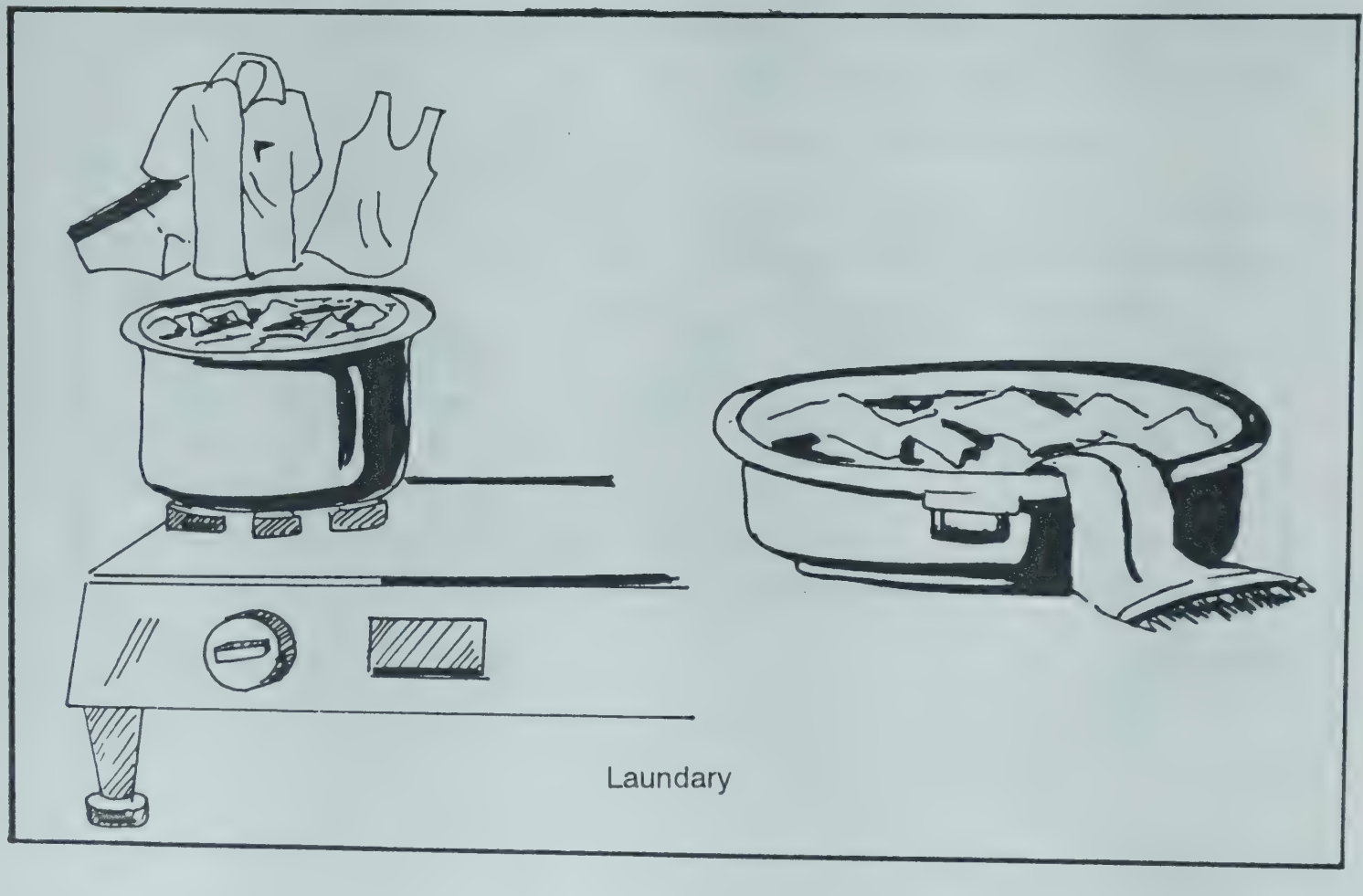
HOW TO HANDLE SOILED LINEN

Soiled or blood-stained laundry should be handled with care.

To kill the virus, it should be :

1. soaked in a chlorine solution for 20 to 30 minutes, or
2. boiled for 20 to 30 minutes, or
3. dry-cleaned (in this case laundry should be dry before sending, and the cleaner informed of the source.)

Direct handling of laundry soiled with any of the body fluids of an AIDS patient should be avoided before it is boiled or machine washed in hot water for 20 to 25 minutes at 80°C or more.



Laundary

HOW TO CARE FOR A PERSON WITH AIDS AT HOME

A person with AIDS is in need of both psychological support and physical care. As there is no cure that the health services can provide, the best care can often be given by the relatives. At home the patient is in well-known social surroundings where he/she feels more secure.

The relatives should be informed about the disease - how it spreads and how it does not spread.

They should be taught how to protect themselves and how to care for the patient.

They should be given a disinfectant to use for cleaning clothes and utensils.

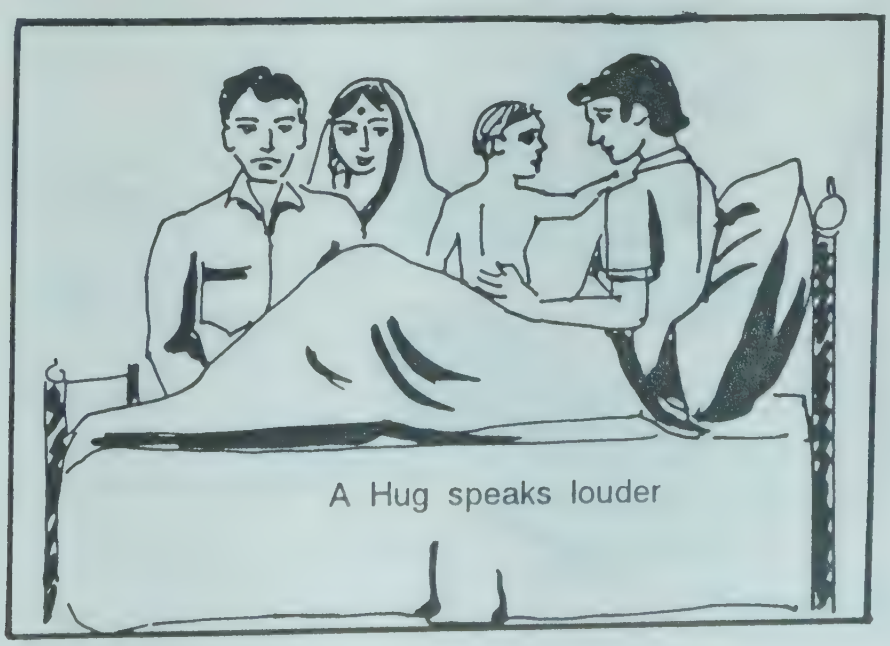
They should be informed that the patient can become emotionally and mentally disturbed.

The family needs support and should be visited when possible.

The patient should be encouraged to use his body, take care of his daily needs, and work normally as much as physically possible.

The care giver should assume increasingly more responsibility as the patient's physical condition deteriorates, but should never substitute for something the patient can do himself.

Counselling and care by a understanding family member can greatly help alleviate feelings of helplessness; the care provider should learn counselling communication skills and start with a soft touch or hug.



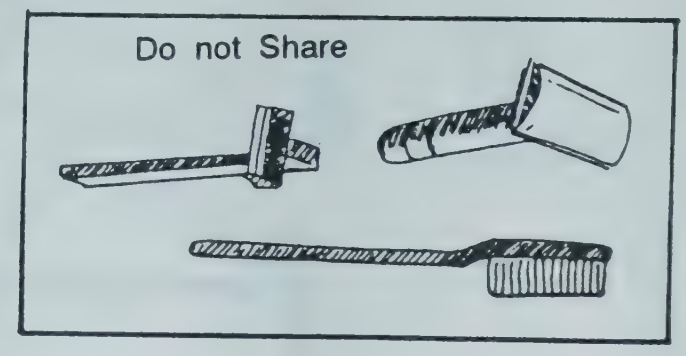
A Hug speaks louder

WHAT THE RELATIVES SHOULD KNOW

Before relatives take an AIDS patient home they should know :

- AIDS is not spread through social contact.
- AIDS is not spread by skin contact.
- People with AIDS need nutritious food to provide energy, protein and vitamins.
- Sexual intercourse with a person with AIDS can lead to HIV infection.
- Blood, vaginal secretions and semen of a person with AIDS are contagious only if these enter into another person's body.
- Clothes and utensils which have been in contact with body fluids of the patient should be :
  - boiled
  - soaked in a disinfectant
- Soiled pads, etc., should be burnt.
- Normal cleaning of other household items not soaked with blood, sexual secretions, or other body fluids is sufficient prevention.
- Avoid sharing toothbrushes, razors, etc.
- An infected person may become very sensitive to many things; therefore a special caring, loving and affectionate attitude needs to be exercised in all dealings with him or her.

Make
a HIV person
eat balance Diet



SELF CARE OF HEALTH CARE PERSONNEL

The risk of health care personnel getting AIDS through their work is very low. However, it is important that heath workers protect themselves from unnecessary exposure to infections. Instruments which have been contaminated by blood or other body secretions should be handled with care. If possible, gloves should be used and then disposed of or sterilized.

Extra long gloves or special arm covers of plastic might be needed during operations. These should be disposed of or sterilized after use.

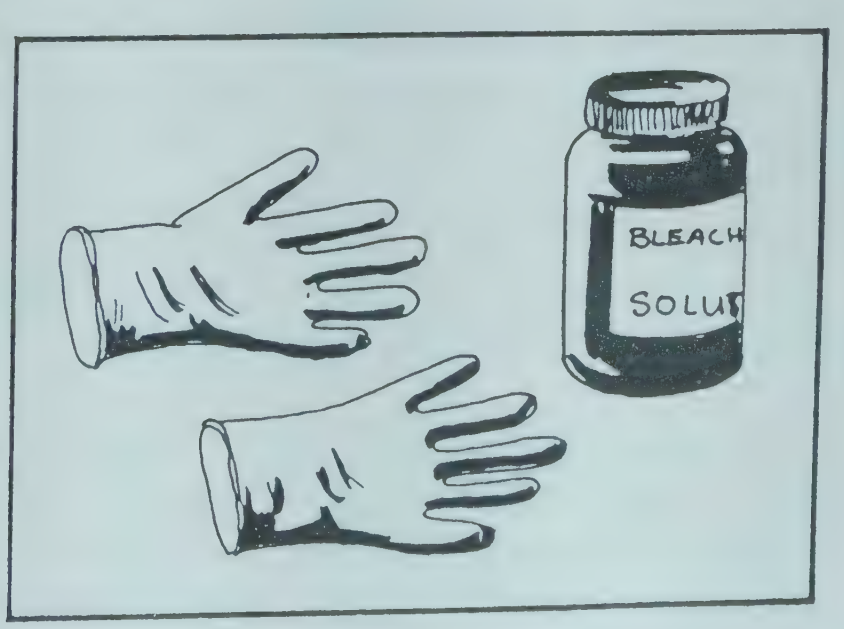
There is no need to wear special coats, masks or gloves while being with the patient, giving nursing care.

Touching an infected person is completely safe.

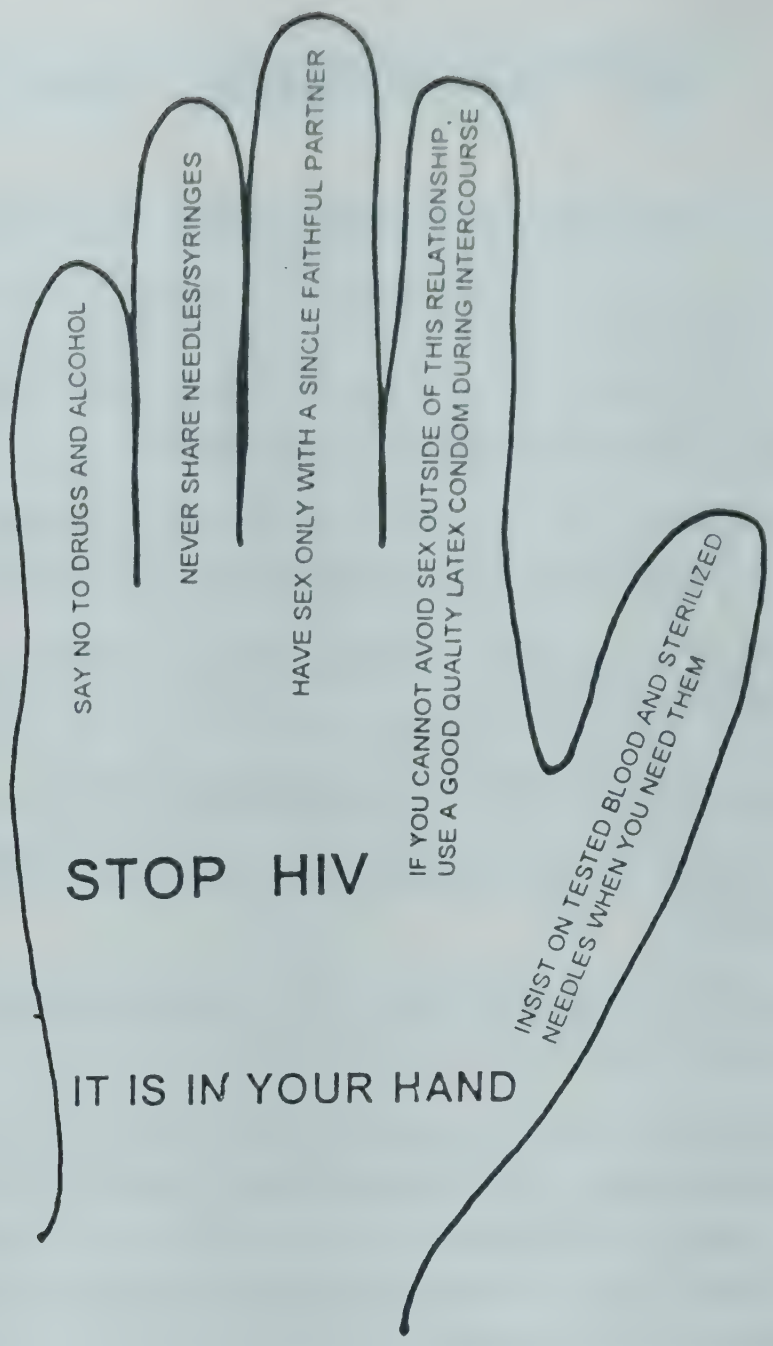
All soiled wastes, such as pads, of an infected person should be burnt or sent for incineration.

The cleaning of spillovers, vomit, etc., should be done immediately with household beach without directly touching the spillovers.

Care should be taken to avoid accidental cuts, abrasions, or injuries with hypodermic needles, sharp instruments, etc. In the case that such an injury is sustained, there is no reason to panic. The risk is actually very small. Allow the wound to bleed freely, wash with running water and soap, then go to your doctor or counsellor for his advice.



Use gloves and clean blood with Bleaching Solution


SAY NO TO DRUGS AND ALCOHOL
NEVER SHARE NEEDLES/SYRINGES
HAVE SEX ONLY WITH A SINGLE FAITHFUL PARTNER
IF YOU CANNOT AVOID SEX OUTSIDE OF THIS RELATIONSHIP,
USE A GOOD QUALITY LATEX CONDOM DURING INTERCOURSE
INSIST ON TESTED BLOOD AND STERILIZED
NEEDLES WHEN YOU NEED THEM
STOP HIV
IT IS IN YOUR HAND

SEX IS SACRED

Do not have sex until you get married; after marriage, remain faithful to your partner.

Remain a virgin until finding and marrying another virgin.

If you are certain that you are uninfected, but are sexually active and cannot practice abstinence, then have sex only with a mutually faithful uninfected partner.

In all other situations, when partners desire sexual intercourse, they must use a good quality latex condom. Remember. Every 15 minutes a new person gets HIV infection from the Red Light districts of Bombay and condoms are at the best 90% safe. When applied correctly and strictly during every sexual intercourse.

Hetero Sexual transmission which includes sex with commercial sex workers, free lancing sex and multiple partnership in sex etc. can be a dangerous practice & is a leading mode of HIV Spread in India.

APPENDIX – A

GLOSSARY

In this guide book a special effort has been made to avoid specialized terminology or technical words. However, in you work as educator or with reference to materials and discussions, it might be helpful to have the following terms clearly and precisely defined.

AFFECTED

Refers to the family, friends and those associated with someone living with HIV/AIDS.

AIDS (stands for AIDS Related Complex)

A combination of diseases caused by a virus which impairs the body's ability to fight infection, making the body especially susceptible to opportunistic infections. The most common of these include Pneumocystis cariniipneumonia, and certain cancers, such as Kasposi's sarcoma a skin cancer.

ANTIBODY

A protein produced by the body's immune system to protect the body by neutralising the action of the Germ against which it is produced. In case of HIV Germ the Antibody is very weak and is not protective. However it enables to test the Antibody to know who is exposed to HIV (A person tested positive) and who is not exposed.

ANTIBIOTICS

Special drugs used to kill Germs. For HIV we have no Antibiotics to kill or eradicate it once it infects the body. For Diseases like Diarrhoea, Pneumonia, TB etc which are common in AIDS we have specific medicine or Antibiotics and these give definite relief and help check symptoms.

ARC (stands for Acquired Immune Deficiency Syndrome)

By the time that the HIV virus has severely damaged the natural immune system, the person may be suffering from diarrhoea, excessive loss of weight, skin rashes, etc. Such persons are in need of great deal of care and support. These symptoms may persist for many years.

ASYMPTOMATIC HIV CARRIER

A person who is positive for AIDS test indicating that he is exposed to HIV; he feels fit and looks normal without any external signs of the infection. He will be infectious to others through exchange of organ donations - blood, sexual secretions and possibly in case of women's breast milk.

AZT This is the only Antiviral agent which can check multiplication of HIV. But only for some years. It is called ZIDOVLIDINE. It cannot kill or eradica HIV once it has infected the person.

BISEXUAL

Who indulges in sexual act with man and woman.

CONDOM

A Rubber Sheath mostly made of Latex (or Animal Membrane) to apply on penis to create a barrier between sexual secretions of two persons during intercourse. It has been used for a long time for family planning purposes and now is widely used to protect partners from exchange of sexual secretions and thus protection from STD's including HIV.

COUNSELLEE

The person who looks for counselling or who is reffered to counselling services.

COUNSELLING

A temporary helping relationship established between a counsellor and the person(s) looking for counselling or referred by friends, religious persons, health professionals, etc.

COUNSELLOR

A person trained to provide counselling services.

ELISA

It is name of the common test used to detect antibodies against HIV to know which blood is infected and which is not.

EMPATHY

A conscious attitude of the counsellor by which s/he attempts to perceive events in a non-judgmental way, from the perspective of the counsellee.

FULL-BLOWN AIDS (sometimes known as 'Frank AIDS')

Is the ultimate indication that the immune system is collapsing. By the time the body has been attacked by at least one life- threatening opportunistic infection or tumour. A great deal of comfort and palliative support will definitely be needed in this stage of the disease.

HAEMOPHILIA

An inherited condition that affects the normal clotting of blood, thus leaving the individual at risk of severe bleeding. Therapeutic blood products can control the disease. Current HIV blood screening tests have greatly reduced the risk of contaminated blood.

HERPES SMPLEX 1

A virus which mostly causes sores around mouth called cold sores.

HERPES SMPLEX 2

A virus which mostly causes sores around anus or vigina.

HETERO SEXUAL

Sex preference for someone of the opposite sex.

HIV (stands for Human Immunodeficiency Virus)

HIV is the virus that can eventually cause AIDS. People infected with HIV may look and feel well for a number of years before any opportunistic infections develop. Many people infected with the HIV virus re completely unaware of the fact, unless they decide to have a medical blood test. However, they can be carriers of the virus transmitting it to other people.

HIV antibody test

A laboratory test made on a small sample of blood of detect whether the body has reacted to the presence of HIV. The body will have tried to protect itself against the virus by producing antibodies. After infection this reaction takes an average of three months to show up in the blood. If the test is positive, the infected person will have been able to pass on the virus from the moment of infection. It is not possible to tell from this test when or how the person tested will proceed to AIDS.

HIV positive (also called seropositive)
Describes a person whose blood shows the presence of antibodies to the infection. Antibodies to the virus generally develop about three months after being infected.

HOMOSEXUAL

Sex preference for someone of the same sex.

IMMUNE SYSTEM

The body's defense system which protects it from infection by recognizing bacteria, viruses and diseases in general. It consists of cells which, among other things, produce antibodies. Antibodies can recognize materials as foreign to the body, and then attempt to neutralise them without injury to the person's cells.

INFECTED

Refers to the person who has the virus within his/her body.

IVDU (Intravenous Drug Using)
One of four main high risk behavioural patterns resulting in HIV infection. Drug use can entail using and often sharing unsterilized needles and syringes that serve to transmit HIV.

KS Acronym for Kaposi Sarcoma
It is a skin cancer common in AIDS patients.

LAY PEOPLE

Members of Christian Churches who are not ordained.

LYMPH GLANDS

Small glands so small that normally we cannot detect their presence by touching/feeling. They become enlarged during infections.

ORAL SEX

Contact of mouth with Genital organ of the partner. It can transmit HIV if the partner is infected.

PASTORAL CARE

A term used in Christian Churches to describe the attention given to all human basic needs, including spiritual ones, and extended to all people in the community.

PASTORAL COUNSELLING

A helping and supportive service offered by the Church (through ordained pastors or trained lay persons) to accompany people in difficult situations in the process of finding better alternatives and making their own best decisions.

PWA - Persons with AIDS

Those who are tested HIV positive. They are also called Body Positive.

REFFERED

A person sent from on health service to another for specialized help or specific advice.

RISK

Used in terms such as 'risk activity' 'risk group' or 'risk behaviour' implies that there is a likelihood of infection in the activity, group or behaviour.

SAFER SEX

Those sexual practices which reduce the risk of transmitting HIV during sexual activity. Sex with only one faithful partner is the most reliable. It is applicable also the use of condom which gives good protection against infections and pregnancy, but they are not 100% reliable.

SHINGLES

Painful Skin Blisters like GRAPES caused by Chicken pox virus.

STD Sexually Transmitted Diseases

Like VD, Syphilis, HIV etc. which spread by sexual inter course or exchange of sexual secretions.

TRANSMISSION

Passing of infection from one to another person.

VACCINE

It is a treated and made harmless component of a germ which when inoculated produce antibodies to protect body from the real infection with the germ. In case of HIV such system does not work and is ineffective and some scientist's feel it could even do more damage.

APPENDIX – B

A Special Advice to health care workers & nurses

HIV can be transmitted during any procedure which breaks the skin or involves instruments coming into contact with blood, semen or vaginal fluids. This might occur when a nurse gives an injection, a traditional healer makes cuts or an intravenous drug user injects himself.

HIV can enter a person from infected blood, semen or vaginal fluid on unsterilized needles or syringes, instruments used in pelvic examinations, IUDs or diaphragms.

It is essential that all instruments, contraceptive devices and syringes are sterilized adequately before use because there is no way of knowing which clients are carrying HIV (or herpes, chlamydia or hepatitis B).

HIV is killed by heat or the correct disinfectant.

There are four ways to sterilize instruments and kill HIV and other viruses and bacteria. Only steam and dry heat kills tetanus and other spores.

Boil in water for 20 minutes after thorough cleaning of instruments.

Sterilize with steam under pressure for at least 20 minutes : 1 atmosphere (101 kPa, 15 lb/in^2) above atmospheric pressure, 121°C (250° F) in an autoclave, pressure cooker or steam sterilizer.

Sterilize with dry heat in an electric oven for 2 hours at 170° C (340° F)

Soak in one of the following disinfectants for 30 minutes :

- sodium hyprochlorite, 0.1 - 0.5% available chlorine (household bleach can be used for this)
- chloramine 2% (tosylchloramine sodium)
- ethanol 70%
- isopropyl alcohol (2-propanol) 70%
- polyvidone iodine 2.5%
- glutaral (glutaraldehyde) 2%
- hydrogen peroxide 6%

APPENDIX – C

ADVICE FOR TEENAERS

If you are a young person ?

If you are a teenager you need to take HIV and AIDS seriously. Many young persons today are known to be infected with HIV and OTHER sexually transmitted diseases.

Most of them where infected due to ignorance, unplanned sex and sex under the influence of Alcohol or Drugs.

Please believe me when I say that understanding about sexuality and importance of staying virgin till marrying another virgin faithful life time partner is the key for prevention of sexually transmitted diseases including HIV.

TEENS MUST UNDERSTAND THAT;

1. Premarital sex and sex with unknown persons or multiple sex partners is very dangerous. It takes just one exposure to HIV either by sexual intercourse or sharing drugs through needles and one gets a DEATH WARRANT from AIDS.

2. Selecting an understanding and virgin life partner (spouse) is very important. One most be patient & vigilant while working towards finding a partner as culturally / socially approprite for the person's value system.

3. Abstinence in sex till one finds a suitable person before one gets married and a mutually faithful sexul relationship thereafter between these two health conscious spouses where neither of them is a drug addict is the surest way of preventing HIV.

4. There is always a good age for marriage when one can take mature sensible decissions. For Boys it should e between 22–26 year of age and for girls 20–24 years of age.

   Early marriage puts tremendous pressure on the couple, their adjustments and therefore have negative consequenous.

   Late marriages have its own problems like premarital sex, indulgence in wrong company, promiscuity in sex and drug addictions etc.

5. It is as true for teens as everybody else that they should never put their lives to the mercy of a condom. Condoms are not totally safe or at best 90–85% safe when used properly and strictly as per instructions and are

used during each sexual encounter from start of sexual intercourse to its finish.

Remember studies have clearly documented that condom failure rate amoung young unmarried girls who become pregnant after using condoms was unbelievably high & alarming

Situation and consequences of HIV infections due to condom failure in those who practice premarital, extramarital or free lance sex could be much graver given the fact that a girl can become pregnant during ovulation and therefore 3–4 days per month while HIV can spread to the partner all days of the month if one of the partner was already exposed to HIV.

6. Teens must attend sex education classes & openly discuss sex and sexual development. He/She must understand how human sex organs develop, their anatomy & Physiology. Most important for them to understand development of external genital organs, breast, start of menstruation (monthly periods) penal erection, night / wet dreams and masturbations; How a girl becomes pregnant and responsible mature parenthood.

   Understanding & free dialogue on these issues most include medical persons, counsellors, teachers & parents of the teenagers & their peer groups. Discussions should be open sided covering friendship with opposite sex, dating, kissing and social relationship based on mutual respect & compatibility. Orientation should be around love, sex, marriage, family life, children, life priorities and hope in life. The most difficult challange for a young person is to learn how to avoid risky situations where he/she might he tempted to indulge in sex, drug or other harmful activities and say emphatically no to all traps which might end up in risky situations.

   It requires an understanding environment peer groups, schooling and parents.

   But the ultimate decissions about this lies with the person who should feel comfortable and embrace the ultimate precaution, "Abstinence till marriage and than stable relation with the spouse where neither of them were drug users but either of them were health conscious."

SOME COMMONLY ASKED QUESTIONS AMOUNG YOUTH GROUPS.

1. For prevention of HIV what is totally safe in sex ?

   Sexual abstinence before marriage and a mutually faithful stable life time relationship with a virgin spouse thereafter. It is 100% effective in prevention of sexual transmission of HIV & other sexually transmitted diseases.

2. What abstinence means in practical life ?

In means no sexual intercouse wheather it is vaginal, anal or oral. In fact for HIV prevention abstinence in practice also includes avoiding any sexual activity which could expose one to sexual secretions of other person like mutual masturbatiuon, water sports etc.

3. Can French kissing (social kiss on lips) spread HIV ?

Not likely but if there are cuts, sores or swelling on lips then repeated kissing may carry a very small risk or no real risk. So far there has not been even a single case reported of HIV infection through kissing an HIV infected person.

4. Can oral sex spread HIV ?

Yes; it is possible as in oral sex there can he some exchange of HIV present in the infected semen, vaginal secretions or blood. It is more true when the partner has tiny cuts or sores in the mouth and indulges with oral sex with an infected person. In many cases cuts etc may be so small that the partners may not be aware of them.

5. Why condoms are not a good answer ?

Using a condom reduces the risk of HIV & STD infections but it can not eliminate HIV completely. The possibity of HIV transmission by using condoms is well documented. Studies on young women who practised sex with condoms as contraceptive have proved that condoms have standardised failure rate of 15.7% over the course of one sexually active year.

The risk will be very high as chances of getting pregnant (due to condom failure) are only 3–5 days per month (the time around ovulation) while chances of getting HIV (due to condom failure) are in each sexual act, everyday and all 365 days of a year.

Condoms reduces the risk but do not eliminate them. If you could not resist using it, you are taking a definate risk. You can minimise the risk by learning to use a condom properly.

6. What precautions we need to use a condom ?

1. Be sure you have a condom before you need it. Check its expiry date.
2. Each time you have sex put a new and unused condom on the penis before it enters the vagina.
3. Put the condom on only when the penis is erect.

4. If you are not circumcised, pull the foreskin of the penis back before putting on the condom.

5. Do not pull the condom tightly against the tip of the penis but pinch the end when unrolling it - thix leaves a small empty space to hold the semen.

6. Unroll the condom all the way to the base of the penis.

7. If the condom tears during sex, withdraw the penis immediately and put on a new condom.

8. After ejaculation, hold on to the bottom of the condom as you pull the penis out, so that the condom does not slip off, then take off the condom carefully without spilling semen.

9. Wrap the condom in paper (such as newspaper) until you can dispose of it in a toilet, a pit latrine or a closed garbage bag, or by burying or burning it.

7. What is safer sex ?

Safer Sex is any sexual practise that reduces the risk of passing HIV from one person to another. Safer Sex practises includes but are not limited to the following –

a) Staying in a mutually faithful relationship where both partners are uninfected.

b) Masturbation, Massage, Rubbing, Dry Kissing and Hugging.

c) Using a condom for all types of sexual intercourse (anal, vaginal and oral)

d) Avoiding certain practices that increase the possibility of HIV transmission, for example "dry" sex which may lead to breaks in the skin.

e) Avoiding sex when either partner has open sores or any sexually transmitted disease (STD)

f) Oral sex – This may be an acceptable alternative for some people, but oral sex should be avoided if there are sores present in the mouth or on the genitals.

Remember – Saving yourself for marriage to some one who have saved himself/herself for you and than safe sexual relationship between these two spouses is the surest way to stop worrjing from Aids.

APPENDIX – D

BREAST FEEDING BY HIV POSITIVE MOTHERS IN RURAL INDIA

It is a proven fact that HIV Virus is known to transmit through Breast milk. Then should an HIV Positive Mother Breast feed her Baby ?

Breast Milk is the best food for Babies and bottle feeds are not only deficient in many essential Nutrients but also are the cause of Diarrhea and other infections mostly due to incomplete/improper cleaning of Bottles, nipples, hand cleaning etc.

Even though HIV has been found in Breast Milk of Seropositive mothers and there is some risk that it may transmit to new born babies through Breast feeds. Still the risk of getting HIV is small as compared to the well known risks of bottle feeding in developing countries.

Experts agree that all mothers irrespective of whether they are HIV Seropositive or not must Breast feed Babies if not advised otherwise by their Practioners.

Those HIV Positive mothers who strongly feel not to breast feed their Babies must consult their Practioner, Counsellor or a Health Worker for advice about other options and necessary precautions.

A WORD OF CAUTION : In those cases where mother is well aware of technique of bottle feeding and can afford to buy powdered milk or prepare a suitable dilution of fresh milk to suit the Baby's physiological needs, she can choose to bottle feed her Baby. This will eliminate Breast feeding related transmission of HIV. Further more it will reduce need for extra calories and extra stress such mothers would require to breast feed their babies.

APPENDIX E

AIDS VACCINE

Since 1984 Scientists all over the world are trying to develop atleast three types of Aids Vaccines.

1. Preventive or Prophylactic Vaccine for all adolscents and adults who might get HIV infections.
2. Therapeutic or Treatment Vaccine for halting HIV multiplication and development of Aids in Hiv infected carriers.
3. Prenatal Vaccine to be given to young and middle aged woman to prevent HIV among babies in the womb in the would be pregnant or pregnant & infected mothers.

There are over 100 drugs and vaccines undergoing trials in dozens of laboratories in many countries.

Atleast two vaccine trials in U.S.A. have shown some promising results. Some trials on chimpanzees have indicated a very definate possibility of Aids Vaccine before the end of this centuary.

Many Questions regarding rigorous trial guidelines, ethics and logistics are still unresolved and we must be convinced that there are no quick fixes for HIV prevention through vaccination programmes atleast in next ten years.

Till we have an effective vaccine which is available on large scale and is cost effective; we must put our full trust on education to change peoples behaviour. At present this is the best cost effective vaccine available to all and everywhere.

Community Health Library and Information Centre (CHLIC)
CPHE - SOCHARA
Koramangala
Bangalore

CARE

AIDS patients have started increasing. They are being rejected by their families, societies and many a time refused admissions in the hospitals. Thus is partially due to fear of medical staff and partially overcrowding in our hospitals.

A person with AIDS can live a normal and active life in community and can be treated through normal Health/Out Patient Clinics till the last stages where hospital/hospices or special home will be a necessity.

Home based care and a referal networking among family physician community services and a community based volunteer/educator well versed in basic nursing, emotional and moral support is the vital need for changing realities of AIDS epidemic.

The best person responsible for providing care and the person who must have final say in this care programme should be the person with AIDS himself. He must be respected and consulted to the best possible extent so that he is positively utilised.

The best person to provide care & support to a sick person in the terminal years of his sickness should be a responsible family member and in most of the cases (if not otherwise advised) preferably his/her spouse or parents.

An educator must fascilitate the care-counselling and referal process in consultation with the infected person and his family.

Care of Dying : In final years the Aids sickness when infections progress beyond treatments in the medical field; all what could & should be done at this stage is to make dying as comfortable as possible.

A counsellor should take active role in preparing the person & the family for the death with dignity and surrounded by a caring con.possionate family & friends.

There is no risk of acquiring HIV infection from people infected with HIV or sick with AIDS during basic nursing care and support to them at their homes in community or clinic setting provided you follow simple safety advice.